JUDITH LUMLEY CENTRE

For Women, Children and Family Health Research

LA TROBE UNIVERSITY

Annual Report | 2022

Founding Director

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Director's report

Welcome to the Judith Lumley Centre annual report for 2022. Despite being freed up from the severe restrictions experienced in Victoria during the first two years with COVID, ongoing pandemic-related challenges meant that 2022 was a difficult year for many. JLC staff and students continued to buoy each other up and work together through this time, and we ended the year on a high note, with many successes and great achievements to celebrate. I would particularly like to thank JLC Deputy Director, Professor Lisa Amir was Acting Director during my absence and has been a great support to me and the Centre.

One highlight of 2022 was the accolades received by the *Baggarrook Yurrongi* project which sought to embed culturally sensitive caseload midwifery into maternity services for women having an Aboriginal or Torres Strait Islander baby. Led by Professor Helen McLachlan with a large team of research and clinical partners, the project resulted in a transformation in midwifery care for this population. Results were published in the prestigious journal *eClinical Medicine*, and the project was awarded the Australian "Engagement Australia 2022 Excellence Award (Indigenous Engagement) and the 2022 La Trobe University Vice Chancellor's award for Excellence in Industry Engagement.

A second highlight was our in-person celebration of the career of Professor Angela Taft with a Festschrift in October. This wonderful event highlighted Angela's ground-breaking work and leadership, particularly in the field of prevention of violence against women. It shone a light on the enormous contributions her research has made to changing policy, practice, service provider training and the health of women globally. We are fortunate that we are not yet saying goodbye to Angela, who is continuing to work with us post "retirement" supervising PhD students and seeing out the completion of several projects.

Professor Jan Nicholson, Director

We also sadly farewelled Dr Kayli Wild after ten years with JLC. Funded by an ARC DECRA, the UNFPA and the World Health Organization, Kayli was working from Darwin to develop and implement a violence prevention and treatment curriculum for maternity services in Timor-Leste. We wish her well in her new position at the Menzies School of Health Research. Finally, we farewelled Dr Sophia Holmlund who had a one-year visiting post-doctoral position with us. Sophia has now returned home to Sweden, but we look forward to continuing to collaborate on the various activities initiated during her time in Melbourne.

With Professor Angela Taft's retirement, 2022 saw the full transitioning of our program leadership to the next generation. The *Sexual and Reproductive Health* program has now passed to the very capable hands of Associate Professor Kristina Edvardsson, while Associate Professor Leesa Hooker leads the *Preventing and Reducing Violence Against Women and Children* program, in addition to the *Child, Family and Community Health* program.

We congratulate Dr Touran Shafiei whose research and academic leadership was recognised with promotion to Associate Professor, and Dr Catina Adams who was promoted to Senior Lecturer in her role as Course Coordinator, Child, Family, and Community Nursing.

Across 2022, we had around 112 peer-reviewed publications, major reports and book chapters – a rate of publications that continues our year-on-year growth whilst retaining a focus on publication in high quality journals. This is another impressive result given the considerable disruptions that continued to occur as a result of the pandemic.

Likewise, our funding has remained strong. Of note, Dr Stacey Hokke received her first external competitive grant to explore young people's perceptions of organ donation. Associate Professor Mandi Cooklin, Dr Stacey Hokke and colleagues were awarded an ARC Discovery Project grant looking at the impact of COVID on work and family life. Associate Professor Leesa Hooker and Dr Jessica Ison were awarded a Victorian Government Crime Prevention Innovation grant to investigate the prevention of drink spiking-related sexual violence. We also had an outstanding year in successes with internal funding schemes: JLC staff and students were awarded five ABC grants (the most awarded to any Centre) and two large collaboration grants. Congratulations to all those who were successful in their funding applications.

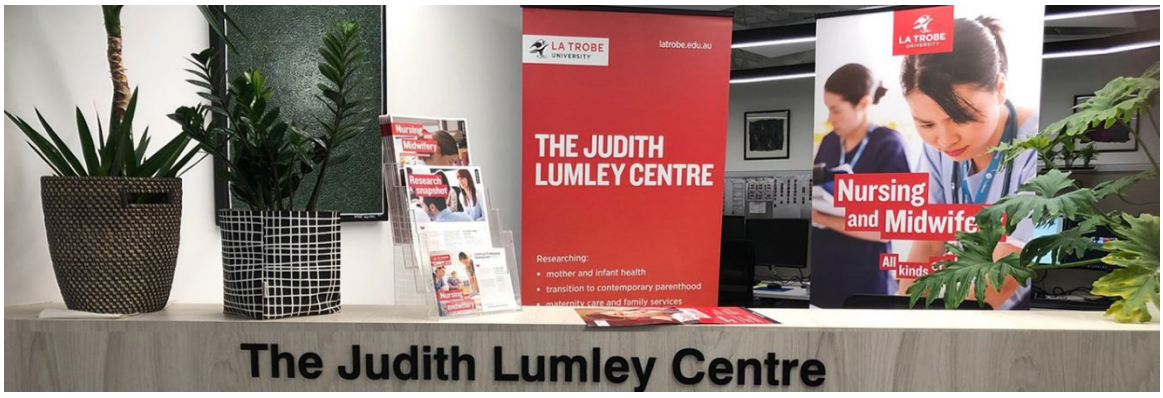
We had three students graduate with their PhDs in 2022 – Drs Catina Adams, Fiona Burgemeister and Heather Grimes – and Tanisha Springall graduated with a Master of Applied Science. Congratulations to these students and their supervisors. Special acknowledgement to Dr Fiona Burgemeister who was recipient of a Nancy Millis Medal awarded to students whose thesis is judged by the examiners to be amongst the top 5% internationally.

I would also like to acknowledge Esther Calje from New Zealand who won the inaugural Judith Lumley Centre Travel Award to attend the PSANZ conference and Deb Pidd who was awarded the Maggie Flood Bursary to assist an HDR student with their research costs. Maggie's generosity and vision in creating these funding opportunities is greatly appreciated.

I want to conclude by congratulating everyone for their hard work and terrific successes across 2022, and by acknowledging the culture of support and volunteering that enables JLC to continue to provide a comprehensive, high quality program of education and development activities, whilst ensuring that we care for our colleagues.

I hope you enjoy reading this report.

Professor Jan Nicholson
Judith Lumley Centre Director



Research Programs

Breastfeeding

Program Lead: Professor Lisa Amir

The Centre is interested in all aspects of breastfeeding.

Our staff and students have conducted randomised trials, cohort studies, cross-sectional studies, audits and qualitative studies in this area. Our projects include clinically focused studies on nipple and breast pain, infection and the use of medicines for breastfeeding women, as well as interventions aiming to increase the maintenance of breastfeeding in communities with low rates.

We have partnerships with the major Victorian maternity services, maternal and child health services, and the Australian Breastfeeding Association, the main advocacy group in Australia.

Mastitis continues to be a particular focus for the Centre and work continues on our two funded projects on this topic. We're analysing data collected for the mixed method study looking at antibiotic prescribing for mastitis in breastfeeding women funded by Therapeutic Guidelines Ltd/RACGP Research Foundation. We have also started data collection investigating immune factors in breastmilk in the NHMRC-funded study led by A/Prof Wendy Ingman, one of our Adelaide collaborators.

Highlights in 2022 were the return of in-person conferences, as well as the now familiar online conferences and webinars. I was invited to give plenary presentations at the Lactation Consultants Association of Australia and New Zealand in NSW, as well as online presentations for international audiences.

The role of micro-organisms (*S. aureus* & *C. albicans*) in the pathogenesis of breast pain and infection in lactating women (CASTLE study)

Lisa Amir and Méabh Cullinane; in collaboration with Suzanne Garland and Sepehr Tabrizi, Bio21 Molecular Science & Biotechnology, University of Melbourne; Susan Donath, Murdoch Children's Research Institute; Catherine Bennett, Deakin University

This project is a descriptive study of 360 breastfeeding women, recruited from the Royal Women's Hospital and Frances Perry House. The aim of the study was to investigate the role of microorganisms in nipple and breast pain in breastfeeding women. Secondary outcomes were maternal physical and mental health in the first eight weeks postpartum.

Funding: NHMRC Health Professional Research Fellowship 2006–2010 (LA); NHMRC Project Grant 2009–2010; NHMRC Equipment Grant 2009–2010; Helen Macpherson Smith grant 2011–2012
Status: primary outcomes published in BMJ Open in 2013; tenth paper published in 2022

RUBY (Ringing Up about Breastfeeding earlY): proactive peer (mother-to-mother) breastfeeding support by telephone

Della Forster, Lisa Amir, Helen McLachlan, Touran Shafiei, Rhonda Small, Fiona McLardie-Hore, Heather Grimes, Christine East; in collaboration with Anita Moorhead, Royal Women's Hospital; Mary-Ann Davey, Monash University; Cindy-Lee Dennis, University of Toronto; Lisa Gold, Deakin University; Kate Mortensen and Susan Tawia, Australian Breastfeeding Association

The RUBY study aimed to determine whether proactive telephone-based peer support during the postnatal period increases the proportion of infants being breastfed at six months of age. RUBY was a multicentre, randomised controlled trial conducted in three hospitals in Victoria, between February 2013 and December 2015.

Over 1,150 first-time mothers intending to breastfeed were recruited at one of the three hospitals (Royal Women's, Monash Health, Western Health Sunshine) after birth and prior to hospital discharge.

The study found that infants of women allocated to telephone-based peer support were more likely than those allocated to usual care to be receiving breast milk at six months of age (intervention 75%, usual care 69%).

Funding: The Felton Bequest, Australia and La Trobe University
Status: main outcomes paper published in *EClinicalMedicine* (2019); women's experiences published in *International Breastfeeding Journal* in 2022; five other papers published

Understanding community attitudes and identifying design solutions to increase women's comfort with breastfeeding in public

Lisa Amir, Stephanie Amir, Helene Johns; in collaboration with Julie Rudner, La Trobe University; Jenny Donovan, Inclusive Design; Miranda Buck, Australian Breastfeeding Association; Sinead Currie and Pat Hoddinott, University of Stirling, UK

This project explores design features and community attitudes that invite or deter breastfeeding in public. We conducted interviews and focus groups with breastfeeding mothers in three local government areas in 2016 (Rural City of Swan Hill, City of Greater Bendigo and City of Melbourne) and at the Royal Women's Hospital in 2018. We received input from over 80 mothers speaking five languages, as well as health professionals and council planning staff. Using these data, we have developed design guidelines that outline how a range of everyday shared spaces could become breastfeeding-friendly as well as the optimal design characteristics for dedicated breastfeeding spaces.

Funding: Building Healthy Communities Research Focus Area
Status: presented at local and international conferences, including GOLD Learning's World Breastfeeding Week free webinar in August 2022; papers in preparation

Evaluation of the Milkdrop Breast Pump Cushion: as new device to help breastfeeding women using a breast pump

Rebecca Hyde, Lisa Amir, Anita Moorhead; with Lauren Indiveri-Clark, consumer

The Milkdrop breast pump cushion is a silicone device which attaches to the breast pump kit for electric breast pumps and aims to improve the comfort and experience of expressing for mothers. The study has three components: 1) women trialling the Milkdrop cushion for one week and providing feedback via two surveys and an expressing diary; 2) individual interviews with women from component one to further explore their experience of using the cushion; and 3) focus groups with lactation consultants to explore their thoughts on the product. Findings from this study will add to the limited evidence for the use of the Milkdrop cushion and may help to inform a larger trial.

Funding: Research Teams Seeding Grants: early- to mid-career researchers, School of Nursing & Midwifery, La Trobe University, 2021-22
Status: recruitment underway

Image credit Dave Clubb, Unsplash

Understanding antibiotic prescribing for mastitis in breastfeeding women: a mixed method study

Lisa Amir, Sharinne Crawford, Méabh Cullinane; in collaboration with Luke Grzeskowiak, University of Adelaide

This project has two broad aims: 1) to describe how general practitioners (GPs) around Australia treat mastitis with antibiotics to see if they are following the antibiotic guidelines for best practice; 2) to understand how GPs make decisions about prescribing for breastfeeding women, and how they use guidelines. The first component uses the MedicineInsight database (2011 to 2021) to extract data on antibiotics prescribed and investigations ordered for mastitis encounters in general practice. The second component is in-depth interviews with GPs.

Funding: Therapeutic Guidelines Ltd/RACGP Foundation
Status: data collection complete, analysis underway

A paradigm shift in lactational mastitis

Lisa Amir; in collaboration with Wendy Ingman, University of Adelaide

This project will explore the role of the innate immune system in the development of mastitis. This is the response of the host (animal/woman) that involves inflammation (including white blood cells) and the complement cascade system, rather than the more well-known adaptive immune system which includes antibody production. We will explore these inflammatory cells in human milk samples to improve our understanding of the role of inflammation in mastitis and explore the feasibility of using anti-inflammatory agents to prevent and treat mastitis.

The first component is a cohort study of multiparous women recruited at the Royal Women's Hospital to compare milk in women with and without a history of mastitis (ROBIN: Risk Of Breast Inflammation).

Funding: NHMRC Ideas Grant 2022-24
Status: recruitment commenced

This is mastitis - Selfie by Remi Peers, Painting by Leanne Pearce

Child, family and community health

Program Lead: Associate Professor Leesa Hooker

The Child, Family and Community Health research stream commenced in late 2019 and has grown to attract interest from government, industry and HDR scholars.

Our emerging team of Maternal and Child Health (MCH) clinician academics and researchers have established collaborative links with international public health nursing and health visitor academic researchers and services.

In Australia, we work with all tiers of government, including urban and rural MCH teams, and the non-government sector, to improve health services, client experiences and maternal, child and family health outcomes.

Reconnecting mothers and children after violence (RECOVER): the Australian child–parent psychotherapy feasibility study

Leesa Hooker, Angela Taft; in collaboration with Cathy Humphreys, University of Melbourne; Sarah Wendt, Flinders University; Emma Toone, Berry Street Childhood Institute

Child-Parent Psychotherapy (CPP) is an intervention for children aged 0–5 years who have experienced traumatic events such as violence, and are experiencing mental health, attachment, and behavioural problems. Therapeutic sessions with the child and primary caregiver seek to strengthen the caregiver-child relationship as a vehicle for restoring and protecting the child's health, development and wellbeing.

The aim of the RECOVER project is to pilot an Australian adaptation of the US-developed Lieberman CPP model of care for abused Victorian women and their children. This includes recruiting 30 mother-pre-school child dyads; delivery of CPP intervention according to family need (average 20–32 weeks); completing a qualitative process evaluation of the feasibility and acceptability of implementing CPP; and the piloting of the outcome measures. Our findings have impacted on child mental health service delivery and enabled expansion of CPP nationally.

Funding: NHMRC, Centre for Research Excellence (CRE) grant and post-doctoral fellowship (LH); Australia's National Research Organisation for Women's Safety (ANROWS) funding (April 2019) for interstate and rural expansion of RECOVER
Status: project complete; ANROWS final report submitted 2022

Victorian Association of Maternal and Child Health Nurses (VAMCHN): MCH Competency Standards project

Leesa Hooker, Bernice Boland and colleagues; in collaboration with the Victorian Association of Maternal and Child Health Nurses and the Australian Nursing and Midwifery Federation (Vic branch)

The Victorian Maternal and Child Health (MCH) professional standards were first developed in 1993. The current, fourth iteration of Standards are outdated and may not be meaningful to intended users. Current MCH nursing practice is dynamic, with significant policy change occurring since the existing standards were released in 2010. In addition, there is limited understanding on how the Standards are viewed and used. In conjunction with existing state government program guidelines, there is need for contemporary MCH nurse competency standards that can assist nurses to demonstrate continuing competence, frame professional development and improve clinical practice.

Using a parallel, mixed method design including document analysis, focus groups with nurse managers and an online MCH nurse questionnaire we aim to explore views and experiences in using the current standards and to produce a contemporary document that is relevant and useful for all intended users.

Funding: Victorian Association of Maternal and Child Health Nurses (VAMCHN) and and Australian Nursing and Midwifery Federation (ANMF)
Status: project ongoing; Standards for MCH practice in draft

Capacity building primary care responses to domestic violence in regional Brazil: Co-design and piloting of a health system model of care

Leesa Hooker, Angela Taft; in collaboration with Kelsey Hegarty, University of Melbourne; Marcos Signorelli, Federal University of Parana, Brazil

La Trobe University and University of Melbourne have partnered with Federal University of Parana, State University of West Parana, Brazil and the House of the Brazilian Woman to co-design a domestic violence (DV) primary care systems model of support, including DV training and resources for regional health services caring for families experiencing domestic violence.

Building on existing relationships with Parana DV services and the health care provider workforce, we aimed to investigate existing healthcare provider DV training needs and primary health care system requirements through observation of current practices, interviews, and an online survey to all Parana coastal healthcare staff about their past DV training, current DV practices and needs.

The team used these data to inform co-design of innovative training materials (informed by the WHO curriculum) for a regional Brazilian context. In future, a co-designed systems model of DV care will be developed with The House of the Brazilian Woman, local staff and the research team.

Funding: Victorian Government Department of Jobs, Precincts and Regions
Status: project complete; paper and Department report submitted 2021

Family Centred Care research in paediatrics – a systematic quantitative review

Ashleigh Butler, Lael Ridgway, Stacey Hokke, Kristina Edvardsson, Lisa McKenna, Bev Copnell, Christine East, Catina Adams, Ellen Henderson,Ulster University, UK

A 'State of the Science' look at Family Centred Care (FCC) research: How much research is there from the past 10 or so years on FCC? What discipline is it in (i.e., medical, nursing, allied health etc); what specialty areas (i.e., NICU, PICU, ED, general paediatrics, oncology, palliative care etc.); what methodologies are used; what countries is the research conducted in; what types of participants are included (e.g., are they looking at perspectives of parents, children, health care practitioners?). The aim is to look for where the research is clustered and where it is lacking, in order to provide recommendations for future research.

Funding: N/A
Status: full text extraction completed; manuscript in preparation

Mother and infant health and maternity services

Program Leads: **Professor Della Forster**
Professor Helen McLachlan
Professor Christine East

The Judith Lumley Centre (JLC) has a long history of researching mother and infant health and wellbeing, as well provision of maternity care, including care providers' views and experiences. Our aim is for our research to make sure the best possible outcomes are achieved for women, their infants, and the maternity care workforce.

Some of our studies focus on specific groups of women, for example immigrant women or other vulnerable groups. Other studies look more broadly. We are undertaking many state-wide and national studies in this area, mostly with a focus on describing and improving current practice.

A 2022 highlight was the Baggarrook Yarrongi project team winning the La Trobe Vice-Chancellor's Research Award for Excellence in Industry Engagement, as well as the Engagement Australia Award in the category of Indigenous Engagement.

The ABLE Study (Asking women aBout disabiLitiEs)

Charlie Smithson, Helen McLachlan, Della Forster, Michelle Newton

It is estimated that more than one billion people worldwide are living with a disability. However, limited information exists on the disability status and needs of women during pregnancy. In Australia, disability status is not included in the Perinatal National Minimum Data Set. While there is a limited amount of qualitative research focusing on the experiences of pregnancy and childbirth of women with a disability, there is an absence of quantifiable data. We aim to address this gap by exploring the prevalence and identification of women with disabilities who utilise maternity services at the Royal Women's Hospital and also explore disability identification practices within public maternity services in Australia. Two separate recruitment periods took place in 2019 at The Women's using two different disability identification questions to attempt to determine optimal disability identification. A follow-up questionnaire was used to gain insight into the experiences of women who identify as having a disability about how they found their pregnancy, labour and birth and the early postnatal period.

A cross-sectional online survey was sent to all maternity managers of public maternity hospitals in Australia to explore disability identification practices. Seventy maternity hospitals completed the questionnaire, which represented all states and territories. Overall, disability identification practices within public maternity services are highly varied and documentation processes are not standardised. We have also examined the perinatal outcomes of women with a disability who had specialised care through the Women with Individual Needs (WIN) Clinic at the Royal Women's Hospital and compared this with hospital-wide perinatal outcome data. The study found that women with disabilities who received care from the WIN clinic were more likely to have a caesarean section and their infants were more likely to be born preterm and be admitted to the Neonatal Intensive Care or Special Care Unit when compared to all other women who gave birth at The Women's.

Funding: The Royal Women's Hospital
Status: data collected; analysis completed. WIN outcomes published in Australian and New Zealand Journal of Obstetrics and Gynaecology in 2021, Maternity managers survey published in Women and Birth in 2022, more papers in preparation, presentations at national and international conferences

Diabetes and antenatal milk expressing (DAME): a randomised controlled trial

Della Forster, Lisa Amir, Anita Moorhead, Christine East; in collaboration with Susan Jacobs, Peter Davis, Amanda Aylward and Rachael Ford, Royal Women's Hospital; Susan Walker, Kerri McEgan, Gillian Opie and Catherine McNamara, Mercy Hospital for Women; Susan Donath, Murdoch Children's Research Institute; Lisa Gold, Deakin University

This world first study found that women with diabetes in a low-risk pregnancy can safely express breast milk in late pregnancy, with the study dispelling concerns that the practice could cause harm to babies.

The DAME study explored the safety and effectiveness of advising women with diabetes in pregnancy to commence expressing breast milk from 36 weeks of pregnancy.

We recruited a total of 635 women and randomised them to the study – about half of them were advised to express. We recruited the women at six sites that provide pregnancy and birth care: the Royal Women's Hospital, Mercy Hospital for Women, Monash Health, Barwon Health, the Women's at Sandringham (part of the Royal Women's Hospital) and Frankston Hospital, from June 2011 until October 2015. We collected data at recruitment in late pregnancy as well as from birth records, and then by telephone interview at two weeks and 12 weeks after birth.

The study found that for women with diabetes in pregnancy who were considered to be of low obstetric risk, there was no harm in advising them to express breast milk in late pregnancy. We also found evidence that infants of these women were more likely to receive only breastmilk in the first 24 hours after birth.

The findings pave the way for clinicians to recommend that low-risk pregnant women with diabetes in pregnancy express and store breastmilk to give to their newborns in the event they develop hypoglycaemia (low blood sugar levels) – a condition that can cause serious health problems in newborns.

The results of our study should not be extrapolated to high-risk groups with diabetes in pregnancy. The primary study results were published in *The Lancet* in 2017, and clinical guidelines have been developed based on the study outcomes.

Funding: NHMRC Project Grant; La Trobe University
Status: ongoing; primary outcomes published in *The Lancet* in 2017; women's experiences in *Maternal & Child Nutrition* in 2021; more papers in preparation, presentations at national and international conferences

Evaluation of the *Growing Together Parenting Kit*: a mixed methods study

Della Forster, Jan Nicholson, Helen McLachlan, Michelle Newton, Heather Grimes, Fiona McLardie-Hore, Touran Shafiei, Sarah Hay

The Royal Women's Hospital developed an educational kit for pregnant women about early parenting, known as *Growing Together*, with funding from the Victorian State Government. The kit has three components – an information book for parents that covers the journey from conception to one year of age, an App that has been specifically designed for the project, and a children's book that parents are encouraged to read to their infants.

We evaluated the kit using mixed methods, measuring a range of outcomes including parents' views and experiences of the care and information, women's experience of motherhood, attachment, infant development, and parental knowledge and confidence as well as the views and experiences of health professionals.

Funding: The Royal Women's Hospital
Status: data collection completed; final report submitted; protocol paper published in *BMC Psychology* (2019); sources of information paper published in *Midwifery* (2022), two other outcome papers in preparation

Exploring the impact of caseload midwifery on preterm birth among socially disadvantaged women (the MAGNOLIA trial)

Helen McLachlan, Della Forster, Michelle Newton, Touran Shafiei, Fiona McLardie-Hore, Sophia Holmlund, Méabh Cullinane; in collaboration with Stefan Kane, University of Melbourne; Jane Sandall, King's College London, UK; Rocco Cuzzilla, Royal Women's Hospital; Emily Callander, Monash University; Cattram Nguyen, Murdoch Children's Research Institute; and Michael Kingsley, University of Auckland, New Zealand; Mia Ahlberg, Karolinska Institute, Sweden

In Australia, approximately 27,000 babies are born preterm each year. Preterm birth is a key indicator of poorer short and long-term health. Poor birth outcomes such as preterm birth are substantially more common for socially disadvantaged populations.

The MAGNOLIA trial is investigating whether receiving continuity of care from one midwife through pregnancy, birth and after-birth (known as *caseload midwifery*) reduces preterm birth among socially disadvantaged women. It will also investigate women's views and satisfaction with care provision; midwives experiences of providing care; stakeholder views on implementation of the caseload model; and conduct a cost-effectiveness analysis of the model.

We are currently recruiting 1,894 women to the MAGNOLIA trial from two hospital sites in metropolitan Melbourne – the Royal Women's Hospital and Northern Health. Approximately half of these women will be randomly allocated to receive caseload midwifery care throughout their pregnancy and birth (the intervention), while the other half will be allocated to choose from all other standard care options available to them at that trial site.

A nested sub-study will be conducted alongside the trial at the Royal Women's Hospital to explore whether the caseload model reduces the physiological stress response in women allocated to that trial arm.

Funding: NHMRC Medical Research Future Fund (MRFF) 2019 Preventive and Public Health Research Grant

Status: recruitment and data collection ongoing

The GEM Study: Exploring the impact of Group prEgnancy Midwife-led care on caesarean section rates and infant health: a multi-site randomised controlled trial

Della Forster, Helen McLachlan, Touran Shafiei, Robyn Matthews, Rebecca Hyde; in collaboration with Stefan Kane, Sue Jacobs, Tram Nguyen, Jenny Ryan and Trish Ryan, Royal Women's Hospital; Nicole Carlon, Northern Health; Emily Callander, University of Technology Sydney; Fleur D'Altera, consumer

Group-based pregnancy care is undertaken in groups of 8–10 women for 6–8 sessions with two midwives and includes education and physical pregnancy checks. Evidence regarding potential benefit or harm is inconclusive, with some suggestion the model is associated with fewer preterm births. A Cochrane review concludes more evidence is needed.

We will be conducting a two-arm, multi-site randomised controlled trial, at two maternity hospitals in Melbourne. We will recruit 3,083 women of low- to moderate-obstetric risk, having their first baby, to compare the effectiveness of midwife-led group pregnancy care (Group Care) with standard individual based pregnancy care (Usual Care). The primary objective is to evaluate the impact of Group Care on caesarean section rates in primiparous women compared with usual care; with the main secondary outcome evaluating the impact of Group Care on women having a 'healthy' infant. We will collect data on women's clinical outcomes and views and experiences; views and experiences of support people; views of experiences of midwives working in Group Care; and an economic evaluation of Group Care.

Funding: Medical Research Future Fund (MRFF) – Preventative and Public Health Research (PPHR) Initiative - 2020 Maternal First 2000 Days and Childhood Health.
Status: ethics application submitted and commenced design of model of care

Maternity and newborn emergencies (MANE) program evaluation

Della Forster, Méabh Cullinane, Helen McLachlan, Michelle Newton, Stefanie Zugna

The Victorian Department of Health funded the *Maternity and Newborn Emergencies* (MANE) program, which was auspiced and run by the Royal Women's Hospital Maternity Services Education Program for regional and rural public maternity providers.

To inform the development of content, design and delivery of the program, a team from the Judith Lumley Centre evaluated MANE. The evaluation was conducted over a three-year period from 2017 to 2020. All rural and regional maternity services who received MANE in 2018 and 2019 participated in the evaluation, with in-depth case studies conducted at five maternity service providers.

Funding: The Royal Women's Hospital
Status: data collection and analysis complete, protocol paper accepted, final report submitted, first paper published, further manuscripts in preparation

The 'EXPert' Study: exploring nurses' and midwives' perceptions of 'expertise' and what it is like to work at a tertiary hospital

Della Forster, Robyn Matthews, Rebecca Hyde, Touran Shafiei, Michelle Newton; in collaboration with Fleur Llewelyn, Royal Women's Hospital

In Australia the concept of 'expertise' within the midwifery and nursing workforce is traditionally based on number of years that the clinician has been practicing. As the number of years in the workforce increases, so does the level of compensation. Anecdotally though, when managers are arranging staffing for a given roster or shift, they may view each staff member not simply based on the number of years they have been practicing but also in terms of how much of an 'expert' they consider the staff member to be. Some staff exhibit a high level of perceived 'expertise' yet receive no formal recognition. What is 'expertise' from a practical point of view if it means more than just the number of years worked? There is a significant lack of research and understanding in this area.

Concurrently, recent evidence shows an increasing prevalence of midwives' and nurses' expressing stress and dissatisfaction about their work. At the Royal Women's Hospital in Melbourne, Victoria, there were anecdotal reports of increased staff dissatisfaction, worries about staff skill mix, and concerns about potential poor workforce retention among midwives and nurses. Given all these factors, we wanted to explore these issues, and also look at what factors positively or negatively affect staff experiences.

The purpose of the 'EXPert' study is to develop a functional definition of expertise within the midwifery and nursing workforce (that can be applied to recruitment, rostering, supporting staff, skill mix and workforce strategies) and to explore midwives' and nurses' experiences of work and what factors affect their views.

Funding: The Royal Women's Hospital (staff support)
Status: data collection complete, two papers published in 2022, further analyses and manuscript preparation underway

Your views matter: exploring the experiences, satisfaction and needs of parents of infants admitted to Newborn Services at the Royal Women's Hospital

Rebecca Hyde, Della Forster, Touran Shafiei, Anita Moorhead, Helen McLachlan; in collaboration with Sue Jacobs and Laura Bignell, Royal Women's Hospital; Silvana Favorito, consumer

Consumer satisfaction is now a fundamental aspect of evaluating the delivery of health care services in today's society. Traditionally, long term outcomes of neonatal intensive care were measured mainly in relation to clinical indicators, but consumer satisfaction is increasingly becoming a quality of care indicator for paediatric and neonatal units. Past explorations of families' experiences of neonatal care at the Women's have been limited and have not included all families whose babies have been admitted to the neonatal intensive or special care (NISC).

The aim of *Your Views Matter* was to explore the satisfaction, experiences and needs of parents whose babies had been admitted to NISC at the Women's, in order to inform the way future care is provided.

A cross-sectional survey was undertaken. Families who had a baby or babies admitted to NISC were assessed for eligibility (admitted ≥ 4 hours and discharged from NISC by 6 months of age).

Eligible families were sent a survey in the mail followed by three reminders. Families who had experienced the death of their baby during their admission were also included in the study and were sent a more tailored invitation to participate, followed by a modified survey if they indicated they would like to participate. A total of 1,014 surveys (or invitations to participate) were sent (990 to non-bereaved families and 24 to bereaved families). Of these, 318 surveys were returned – 32% (314/990) of non-bereaved families, and 57% (4/7) of bereaved families who indicated they wanted to participate.

Families had high levels of satisfaction with care, however level of satisfaction differed depending on gestation of baby at birth, with lower infant gestational age associated with higher parental satisfaction.

Funding: The Royal Women's Hospital Foundation
Status: data collection complete, analyses and manuscript preparation underway

Labour pain assessment: evaluation of a new woman-centred approach

Laura Whitburn, Christine East, Lester Jones; in collaboration with Mary-Ann Davey, Monash University

Current approaches to supporting women to manage labour pain need reconsideration. We have developed a multidimensional measurement tool to assess women's labour pain experience. We have funding for a pilot study to evaluate this new tool and to utilise women's feedback to facilitate the refinement of the labour pain assessment tool for use in a large longitudinal study.

Funding: Mercy Health Academic Research; LTU Social Research Assistance
Status: data analysis

Midwives' views and experiences of supporting women to manage labour pain

Laura Whitburn, Christine East, Lester Jones; in collaboration with Kate Dawson, Australian Catholic University; Elizabeth Newnham, University of Newcastle

This national survey study aims to explore midwives' experiences of supporting women to manage pain during childbirth. It will focus on the midwives' attitudes towards labour pain, and the strategies (verbal and non-verbal) that midwives use to support birthing women.

Funding: N/A
Status: data collection

Induction of labour: a shared decision. A pilot project to develop surveys for women before and after their induction of labour

Christine East; in collaboration with Melissa Buultjens, La Trobe University and Jen Fielding, Monash Health

This project forms part of an overall program of research that aims to explore women's experiences of shared involvement in decisions related to induction of labour (IOL), using surveys pre- and post-IOL. Funding has been obtained to develop and pilot a survey of women pre- and post-IOL.

Funding: Mercy Health Academic Research; Mercy La Trobe ARCH
Status: literature search; draft surveys developed; ethics application pending

Postpartum haemorrhage

Christine East, Kritika Poudel

Postpartum haemorrhage (PPH) contributes to significant morbidity in Australian childbearing women, with rates of severe haemorrhage seeming to rise in the past decade. We have explored risk factors as they relate to Mercy Health's two maternity services and considered the impact of improved ascertainment of blood loss volumes on both overall PPH rates and the need for transfusions or higher dependency care.

Funding: La Trobe Alumni donation; Mercy La Trobe ARCH
Status: conference abstracts; manuscripts in preparation

Is there equity in telehealth?: Exploring the experience of telehealth services by patients with limited or no English proficiency

Natalija Nesvabda, Maggie Pliszka, Mercy Health; Christine East, Rachael Duncan

The COVID-19 pandemic has seen a rapid change in the provision of telehealth (phone and video) services to patients. Our recent experience suggests that migrant patients, particularly those with limited or no proficiency in English (who need an interpreter), are experiencing additional barriers in accessing healthcare through telehealth. This pilot study aimed to gain a preliminary understanding of the experience of telehealth (phone and video) by two patient groups at Mercy Health, including pregnant women, where there is consistently high demand for interpreting services, given than they have limited or no proficiency in English, namely those whose preferred languages are Arabic or Chinese.

Funding: Mercy Health Academic Research, Mercy La Trobe ARCH
Status: data analysed; report drafted

Safer Care Victoria: Review of 10 years of recommendations from the Consultative Council on Obstetric and Paediatric Morbidity and Mortality (CCOPMM)

Christine East, Kritika Poudel, Jia Jia (Jessie) Liu, Noushin Arefadib

This review is considering the recommendations made regarding postpartum haemorrhage, fetal surveillance and neonatal resuscitation in the Victoria's Mothers, Babies and Children reports produced by CCOPMM from 2010 to 2020. It is identifying and categorising these recommendations, along with determining whose responsibility these were and the way in which the recommendations were phrased. A sample of clinical practice guidelines from various maternity services throughout Victoria is being reviewed to consider how the CCOPMM recommendations are reflected / incorporated. The final report will propose a way forward for promoting the inclusion of CCOPMM recommendations in clinical guidelines, service policies and ultimately, clinical practice.

Funding: Safer Care Victoria Fellowship 2022-2023

The TULIP study: Telehealth Use In Pregnancy – a pilot randomised controlled trial

Della Forster, Robyn Matthews, Rebecca Hyde, Touran Shafiei, Helen McLachlan, Chris East; in collaboration with Stefan Kane and Jeanie Cheong, Royal Women's Hospital; Sue Walker, Lisa Hui and Andrea Dodd, Mercy Hospital for Women; and Emily Callander, University of Technology Sydney

Pregnancy care has traditionally been delivered through face-to-face visits, however as a result of the COVID-19 pandemic, there was a rapid move to having pregnancy care via telehealth. This rapid change led to concerns about what this meant for clinical outcomes and also consumer experiences. Despite these concerns, many health services plan to continue to offer telehealth for pregnancy care in some way.

We are conducting a two-site, pilot randomised controlled study with 200 pregnant women, comparing all face-to-face care pregnancy care with combined telehealth and face-to-face care. We will collect data on clinical outcomes, adherence to telehealth schedule, clinician's views of telehealth and women's views and experiences of pregnancy care.

Funding: Norman Beischer Medical Research Foundation Innovation Grant, 2021
Status: recruitment complete December 2022, data collection underway

Image credit Polina Tankilevitch, Pexels

Improving the health of Aboriginal mothers and babies through continuity of midwife care: a multi methods translational study

Helen McLachlan, Della Forster, Michelle Newton, Catherine Chamberlain, Fiona McLardie-Hore, Pamela McCalman; in collaboration with Sue Kildea, Charles Darwin University; Jane Freemantle, Ngaree Blow, Karyn Ferguson and Jeremy Oats, University of Melbourne; Jennifer Brown, Deakin University; Georgia Dickinson, Victorian Aboriginal Community Controlled Health Organisation; Marika Jackomos, Mercy Hospital for Women; Sue Jacobs and Jenny Ryan, the Royal Women's Hospital; Susan Donath, Murdoch Children's Research Institute; Lisa Gold, Deakin University

The Baggarrook Yurrongi (Woiwurrung language of the Wurundjeri people) meaning 'Woman's Journey' and the Nuraagh Manma Buliana (Yorta Yorta language meaning 'All of us working together in pregnancy') was a five-year NHMRC funded Partnership Project with the Victorian Aboriginal Community Controlled Health Organisation (VACCHO), the Royal Women's Hospital, the Mercy Hospital for Women, Sunshine Hospital (Joan Kirner Women's and Children's) and Goulburn Valley Health. The primary aim of the project was to explore the capacity of maternity services to implement a new, culturally safe model of care for Aboriginal and/or Torres Strait Islander women (or women having an Aboriginal and/or Torres Strait Islander baby). Women were proactively offered 'caseload' midwifery: they received continuity of care from a primary midwife through pregnancy, labour, birth and postpartum. The study is also exploring the effect of the model on perinatal outcomes for Aboriginal women and their infants, women's experiences of care as well as midwives' views and experiences.

The model was introduced at the Royal Women's Hospital in March 2017, Sunshine Hospital in October 2017, and the Mercy Hospital in April 2018, and is embedded at the three sites

In 2022 we published our primary study outcomes of model implementation in the *Lancet* journal's *Eclinical Medicine*, reporting a 90% uptake of the model and a 21 fold increase in First Nations women accessing the model. Data related to First Nations women's experiences of maternity care and what they rated as important to care was also published, with trustworthy staff, privacy and confidentiality, culture and community rated as most important.

Analysis of clinical outcomes are underway, as well as experiences of midwives and key stakeholders.

A highlight of the project was the project team winning the Engagement Australia Award in the category Excellence in Indigenous Engagement.

Funding: NHMRC Partnership Grant and funding from five partner organisations
Status: in progress; main findings published, further manuscripts submitted

RUSOM (Registered Undergraduate Student in Midwifery): Evaluating an undergraduate midwifery student employment model in Victoria

Sharon Mumford, Helen McLachlan, Michelle Newton, Charlie Benzie, Rebecca Hyde, Christine Trevena, Christine East, Rebecca Hyde, Della Forster; Fleur Llewellyn,Royal Women's Hospital; Magdalena Pliszka, Mercy Health; Shelley Hardingham, Bendigo Health

In response to the COVID19 pandemic, in 2020 the Victorian Department of Health developed a number of health care workforce maximisation strategies, one of which included a 'Registered Undergraduate Student of Midwifery' (RUSOM) model. This was in recognition of the potential for midwifery students to support the maternity care workforce shortages that have been exacerbated by the pandemic. A RUSOM is defined as "a person currently enrolled at a university to undertake midwifery study, who is registered with AHPRA as a student midwife, and who at commencement has successfully completed not less than two years of the Bachelor of Midwifery Degree or dual degree Bachelor of Nursing and Midwifery". RUSOMs must work under the delegation and supervision of a midwife and cannot have sole allocation of a patient. They also must work within the scope of a core activity list, be employed for a minimum of 7.5 hours per week, and work shifts of four hours or more during the day and evening or 10 hours at night.

This model has been implemented in a number of maternity settings across the state. There has been no previous evaluation of the RUSOM model. Three independent evaluations of the RUSOM model in four maternity services (three metropolitan and one regional) from the perspective of RUSOMs and midwives have been conducted by La Trobe University in 2021 and 2022.

These evaluations have added to the limited evidence regarding undergraduate employment models for midwifery students, and were used to support an expansion of the duties list of RUSOMs in 2022. The model was highly valued at all sites and participants were strongly in support of continuation of the model and considered it to be a key strategy given the workforce shortages. Further research should explore the expansion and sustainability of RUSOMs in the maternity workforce.

Funding: Royal Women's Hospital, Mercy Health and Bendigo Health
Status: in progress; publication in Women and Birth (2022). Evaluation reports - The Women's October 2021, Mercy Health August 2022, Bendigo Health March 2023

Centre for Teamwork Excellence in Maternity Emergencies (CTEME) program evaluation

Méabh Cullinane, Della Forster, Laura Whitburn, Helen McLachlan, Michelle Newton, Stefanie Zugna, Charlie Benzie

The Centre for Teamwork Excellence in Maternity Emergencies (CTEME) program encompasses several education programs delivered by the Royal Women's Hospital Maternity Services Education Program (MSEP) team. Programs are delivered primarily to maternity clinicians across Victoria, and include an emergency birthing program designed for non-birthing services, and a maternity emergency program delivered to rural and regional maternity service providers.

An evaluation of the CTEME program is currently underway, with a specific focus on sustainability. All Victorian services attending a CTEME program in 2022 and early 2023 will be invited to participate in the evaluation. Data collection is currently ongoing. A final report will be delivered to the Royal Women's Hospital in 2023, with outcome manuscripts published after that date.

Funding: The Royal Women's Hospital
Status: ongoing

The FUCHSIA Study: FUture proofing the midwifery workforce in Victoria: statewide cross-sectional survey exploring Health, wellbeing and SustaInAbility

Della Forster, Robyn Matthews, Rebecca Hyde, Touran Shafiei, Michelle Newton, Helen McLachlan, Sharon Mumford, Méabh Cullinane; in collaboration with Fleur Llewelyn, Royal Women's Hospital

The provision of safe maternity care depends on an adequately staffed and skilled midwifery workforce. Accurate and up to date midwifery workforce data are currently lacking due to inadequate data collection and mapping of workforce needs. Victoria has had ongoing maternity sector workforce issues, and the 2018 inquiry into Victoria's perinatal services identified significant

We conducted an online, population-based cross-sectional study in Victoria, Australia between March and October 2021. All midwives employed in public and private maternity services, managers of maternity services, privately employed midwives and midwifery students enrolled in 2021 were invited to participate.

We aimed to assess the state of the midwifery workforce in Victoria in 2021, what may affect the

sustainability of the future midwifery profession in Victoria and to further understand what the workforce challenges are (related to health, wellbeing, sustainability and the COVID-19 pandemic) facing Victorian midwives, midwifery students and maternity services in 2021 and what factors affect these. We plan to repeat the survey of managers and midwives in 2026.

Funding: N/A
Status: data collection complete for 2021 survey, analyses and manuscript preparation of 2021 findings underway

The FUCHSIA Cohort study: FUture proofing the midwifery workforce in Victoria: a statewide longitudinal Cohort study exploring Health, wellbeing and SustaInAbility

Della Forster, Robyn Matthews, Rebecca Hyde, Touran Shafiei, Michelle Newton, Helen McLachlan, Amanda Cooklin, Méabh Cullinane; in collaboration with Fleur Llewelyn, Royal Women's Hospital and Anna O'Connell, Deakin University

Midwives are integral for ensuring high-quality care and positive outcomes for women and newborns globally. However, without acceptable staffing levels and skill mix there is a potential for a reduction in the quality of care. There are significant problems with retention and equitable distribution of midwives across rural, regional, and metropolitan areas in Australia. There is also local and international evidence the midwifery profession is facing significant challenges, e.g., high rates of burnout and mental health issues, job dissatisfaction, and an ageing workforce that is predominantly part-time. Very few studies of Australian midwives have been conducted longitudinally so most evidence is based on cross-sectional studies, which may over-emphasize the causal link between workforce challenges, health outcomes and intention to leave the profession.

We are conducting a longitudinal cohort study using a group of midwifery students and midwives (n=474) who agreed to participate from the FUCHISA study in 2021. We will be conducting annual surveys of this group in 2022, 2023, 2024 and a final survey in 2025.

We aim to describe the career trajectories and wellbeing of midwifery students and midwives over a five year period and explore the risk or preventative factors that affect these and what that means for the sustainability of the midwifery profession.

Funding: N/A
Status: data collection complete for 2022 survey, analyses and manuscript preparation of 2022 findings underway

COLLABORATIVE WORK

My baby's movements: a stepped wedged cluster randomised trial of maternal awareness and reporting of decreased fetal movements to reduce stillbirth

Christine East, Della Forster; in collaboration with Vicki Flenady and Glenn Gardener, University of Queensland; Philippa Middleton, South Australian Health and Medical Research Institute Limited; Michael Coorey, Murdoch Children's Research Institute; David Ellwood, Griffith University; Caroline Crowther and Emily Callander, NHMRC Clinical Trials Centre; Jane Norman, Medical Research Council (MRC) Centre for Reproductive Health, Edinburgh, UK; Frances Boyle, University of Queensland

The My Baby's Movements study was aligned with the Stillbirth CRE (see below for more information). This was conducted in 26 Australian hospitals. Christine East is one of the chief investigators and also coordinated this from 2017–2019 in her previous role at Monash Health, while Della Forster and colleagues undertook this at the Royal Women's Hospital and Sue McDonald coordinated this at Mercy Health (2018–2019).

Funding: NHMRC Project Grant APP1067363; NHMRC Stillbirth Centre for Research Excellence APP1116640;
Status: completed; one paper published 2022, two papers previously published.

Prevention of adverse child behavioural development following maternal depression in pregnancy

Christine East; in collaboration with Jeanette Milgrom, University of Melbourne; Helen Skouteris, Monash University; Megan Galbally, Murdoch University; Vivette Glover, Imperial College London, UK

There is substantial evidence that maternal depression during pregnancy can affect fetal and child neurodevelopment. Children of women depressed in pregnancy are likely to have an increased risk of behavioural problems such as anxiety, depression and attention deficit/hyperactivity, with effects on mental health lasting at least to adolescence. This randomised controlled trial compares medium-term change in child outcomes following cognitive behavioural treatment of depression in pregnancy or usual care.

Funding: NHMRC Project Grant APP1143448, 2018–2022
Status: in progress

Perinatal mental health

Program Lead: Associate Professor Touran Shafiei

Perinatal mental illness is a major public health issue, with potential serious health consequences for the woman, her infant and family members. In Australia, up to one in five women (more than 60,000 women) experiencing depression and/or anxiety per year, posing a significant health and economic burden.

This research program aims to build evidence about the critical factors around maternal emotional wellbeing and then to design, test and implement evidence-based interventions to improve maternal mental health.

We are currently undertaking a large NHMRC-funded randomised controlled trial (DAISY) which aims to evaluate the impact of proactive telephone peer support on preventing postnatal depression and anxiety. In 2020, we had to pause participant recruitment due to COVID-19 pandemic restrictions. Given the high levels of stress and anxiety in the community and an increasing pool of trained volunteers available to provide telephone peer support, we commenced a DAISY sub-study offering eligible women birthing at the study sites self-referral to access support.

DAISY: preventing postnatal depression in new mothers using telephone peer support – a randomised controlled trial

Della Forster, Helen McLachlan, Touran Shafiei, Jan Nicholson, Jessica Bee, Heather Grimes, Catina Adams; in collaboration with Alan Shiell, La Trobe University School of Psychology and Public Health; Cindy-Lee Dennis, University of Toronto; Tram Nguyen, Royal Women's Hospital; Cattram Nguyen, Murdoch Children's Research Institute; Jane Fisher, Monash University; in collaboration with Hume and Wyndham Local Government Areas (LGAs), Royal Women's Hospital and PANDA (Perinatal Anxiety and Depression Australia)

In Australia, 17% of new mothers experience postnatal depression (PND), with potential serious health consequences for the woman, her infant and family members. However, one in three Victorian new mothers experiencing PND do not seek help. The DAISY study is a multi-site, two-arm randomised controlled trial (RCT) matching peer volunteer mothers with a lived experience of postnatal depression and/or anxiety (from which they have recovered) with new mothers at increased risk of postnatal depression or anxiety. New mothers, who are at slightly higher risk than average of developing depression and/or anxiety, are recruited from the postnatal units at the Women's.

Mothers randomly allocated to peer support group receive proactive telephone-based support from a peer volunteer up until six months postpartum, and both groups receive all the usual care and supports available as part of routine care.

The aim of DAISY is to test whether proactive peer support by telephone decreases the risk of postnatal depression at six months postpartum. A range of other health outcomes are also measured, along with exploring the cost-effectiveness of such a service. We will recruit 1,060 women to the study and aim to train about 200 peer volunteer mothers to provide the telephone support.

Funding: NHMRC Project Grant GNT1141284
Status: volunteer recruitment and training underway; participant recruitment and data collection underway

Peer support for new mothers during COVID-19

Della Forster, Helen McLachlan, Touran Shafiei, Jan Nicholson, Jessica Bee, Meabh Cullinane, Heather Grimes, Catina Adams; in collaboration with Alan Shiell, La Trobe University School of Psychology and Public Health; Cindy-Lee Dennis, University of Toronto, Canada; Tram Nguyen, the Royal Women's Hospital; Cattram Nguyen, Murdoch Children's Research Institute; Royal Women's Hospital and PANDA (Perinatal Anxiety and Depression Australia)

Women birthing during COVID-19 lockdown had shorter postnatal stays, reduced interaction with health services and less social supports following birth. Levels of stress and anxiety was generally higher, and social isolation was greater than usual for new mothers. Given the potentially high levels of stress and anxiety in the community, and given we had an increasing pool of peer volunteers trained and available to provide telephone peer support, we commenced a DAISY sub-study where we offered all eligible women birthing at the study sites self-referral to access telephone peer support. All women who gave birth at the maternity services at hospital trial sites were provided a flier prior to hospital discharge postpartum (Jun to Oct 2020), including information and how to express their interest via a QR code to scan, a URL link, a study email address, and a study phone number.

Interested women completed a baseline survey (assessing their eligibility) and provided their consent online. Eligible women who consented were matched with a peer volunteer mother to receive regular telephone support for a few months. Data on women's wellbeing and experiences of peer support were collected at completion of the support period.

Funding: N/A
Status: completed; analysis underway

IVY: investigating an online community of support for emotional health in pregnancy

Della Forster, Touran Shafiei, Helen McLachlan, Laura Biggs, Sara Couch; in collaboration with Terri Smith, Cathy Wyett, PANDA; Greg Wadley, University of Melbourne

This study aimed to develop and test the feasibility, acceptability and functionality of a moderated online peer support App to be used on smartphones, tablets or computers, to reduce perinatal depression and anxiety in women at increased risk. The project has been undertaken in collaboration with Australia's peak consumer perinatal mental health organisation PANDA – Perinatal Anxiety & Depression Australia.

An iterative user-centred approach was used to design and develop the App, via a series of interviews, focus groups and design workshops with consumers, stakeholders and software designers. We then conducted a pilot randomised controlled trial (RCT) of the App with 100 pregnant women to test potential impact and engagement as well as to inform a large adequately powered RCT.

Funding: Norman Beischer Medical Research Foundation; Building Healthy Communities RFA, La Trobe University
Status: app developed; final report submitted to the funding body; data analysis in progress; papers in preparation

Image credit La Trobe University

Identifying the perinatal mental health needs of immigrant and refugee women

Touran Shafiei, Margaret Flood, Jessica Bee; in partnership with Multicultural Centre for Women's Health

Compared to native-born women, immigrant and refugee women are more likely to experience perinatal mental illness, less likely to seek help for their emotional difficulties and less likely to use perinatal mental health services. We conducted a study of perinatal mental health needs of immigrant and refugee women living in the North Division of Victoria, to gain a better understanding of the local barriers and facilitators to immigrant women's access to health services during the perinatal period. The study had three components:

1. A literature review of perinatal mental health, its prevalence, impacts and risk factors, with a focus on the experiences of immigrant and refugee women and their health seeking;

2. 'Response mapping' to identify the range of current perinatal support services and related activities in the North Division and current perinatal support programs and services which are specifically for immigrant and refugee women; and

3. In-depth interviews with service providers about the gaps and facilitators of providing mental health services to immigrant women during pregnancy and after birth.

Funding: Department of Health, Victoria
Status: final report submitted to the funding body; paper in preparation

Prevalence and pregnancy management of mental health issues in women booking for pregnancy care at the Women's

Touran Shafiei, Della Forster, Helen McLachlan

We undertook a retrospective clinical audit of the prevalence and pregnancy management of mental health issues in women booking for pregnancy care at the Women's Hospital. The aim was to identify women who were documented as experiencing mental health problems during their pregnancy to ascertain their demographic characteristics, and any documented management and referrals during pregnancy care.

All women who attended booking visits at the Women's Hospital in two randomly selected months were included in the initial review. Pregnancy records of those who were identified as experiencing any mental health issues were explored further. Data were collected from the hospital electronic data systems and medical histories for approximately 1200 pregnant women attending the Women's for their pregnancy care.

Funding: The Royal Women's Hospital
Status: data collected; analysis underway

Image credit La Trobe University

Examining the postnatal depression and anxiety screening and management practices of Maternal and Child Health Nurses in Victoria, Australia: A multiphase study

Noushin Arefadib (PhD candidature), Touran Shafiei, Amanda Cooklin, Jan Nicholson

Routine screening for postnatal depression and anxiety (PNDA) can increase rates of detection, referral, and service utilisation among women. In Victoria, Australia identifying women with PNDA and facilitating their access to supports is largely the responsibility of Maternal and Child Health Nurses (MCHNs). Little is known how MCHNS carry out this work and the socio-ecological factors which impact their ability to do so. The aim of this thesis was to understand MCHNs' PNDA screening and management practices, and the factors which impacted these. A multiphase design, comprising three sequential studies was used.

Study One was a scoping review which examined the range and nature of primary research evidence on PNDA screening and management by MCHNs in community-settings. Study Two was a population-based cross-sectional survey which examined Victorian MCHNs' PNDA screening practices and the factors which impacted screening in line with the Australian Clinical Practice Guideline. Study Three comprised qualitative interviews with MCHNs to explore their experiences in greater detail.

Funding: La Trobe University Postgraduate Research Scholarship
Status: four papers published (2021-22); Thesis under examination

Realist evaluation of an Australian volunteer doula program for women experiencing socioeconomic adversity

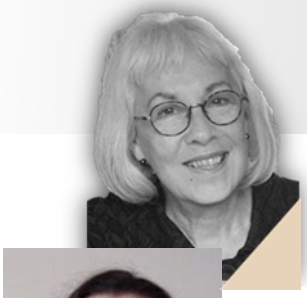
Kerryn O'Rourke (PhD candidature), Touran Shafiei, Michelle Newton, Jane Yelland, Murdoch Children's Research Institute

How women are cared for while having a baby can have profound and lasting effects on their lives. Women living with socioeconomic adversity have often have inequitable and unreliable access to high quality maternity care. Doula support programs offer complementary care for these women and are known to, on average, have positive outcomes. Less understood is how, when, and for whom these programs work. A realist evaluation of an Australian doula program explored these questions. The program provides free social, emotional, and practical support by trained volunteer doulas during pregnancy, birth, and new parenting.

Using realist evaluation methodology, seven hypothesised program theories of how, when and for whom the doula support works were developed from key informant interviews and a rapid realist review of literature. Two of these hypothesised theories were tested and refined with data from focus groups with eight doulas, and realist interviews with seven English speaking and six Arabic speaking clients. Realist interview and cross-cultural qualitative research methods were integrated for interviews with Arabic speakers, in collaboration with a bicultural researcher.

Funding: Birth for Humankind (Industry Postgraduate Research Scholarship); La Trobe University Research Training Program Scholarship
Status: four papers published (2020-22); thesis passed

Preventing and reducing violence against women and children



Program Leads: **Professor Angela Taft**
Associate Professor Leesa Hooker

The World Health Organization estimates that 1 in 3 women worldwide have experienced physical and / or sexual violence in their lifetime, mostly by an intimate partner. This research program aims to build a body of evidence for effective interventions to prevent and reduce the effects of family and gender-based violence, and sexual violence and harassment especially those that can be delivered in primary health care and community settings.

We also acknowledge the need to shape responses to the differing effects of family violence on diverse communities, such as migrant and refugee and Aboriginal communities.

HARMONY: a pragmatic cluster randomised controlled trial to strengthen primary care response to domestic violence among migrant and refugee communities

Angela Taft, Felicity Young, Molly Allen-Leap, Bijaya Pokharel, Xia Li, in collaboration with Gene Feder, University of Bristol; Kelsey Hegarty and Douglas Boyle, University of Melbourne; Danielle Mazza, Monash University; Jane Yelland and Cattram Nguyen, Murdoch Children's Research Institute; Richard Norman, Curtin University; Ruth Fox, InTouch Multicultural Centre Against Family Violence; Claudia Garcia-Moreno, World Health Organization

HARMONY is an adaptation of a highly successful UK trial (Feder et al, 2006), with the addition of elements from two Australian studies, WEAVE (Hegarty et al, 2013) and MOSAIC (Taft et al, 2009), including cultural safety.

The primary aim is to test the effectiveness of culturally safe domestic and family violence (DFV) training, combined with the yearlong support of a bilingual advocate support worker, to increase the rates of GP identification, documentation and referrals of women experiencing DFV, especially those of migrant/refugee background. A secondary aim is to evaluate routine GP systems software developed to collect aggregated anonymised patient data on the identification, safety planning and referral of DFV incidents, as well as increase the coding of patient ethnicity.

Recruitment of clinics began in 2019. Following a six-month suspension during the COVID-19 pandemic, we recruited 24 clinics but had 5 withdraw. The DFV training was completed between October 2020 and June 2021. The protocol paper was published 2021 in *BMJ Open* and a systematic review of culturally competent family violence response to women in primary care was published in 2022 in *Trauma Violence and Abuse*. HARMONY training was the focus of presentations at conferences in 2022, including NNVAWI and SVRI. Data collection (GrHanite) through electric medical records for participating GP clinics concluded in August 2022, and analysis began in late 2022 with publications of baseline and outcome data due in 2023.

Funding: NHMRC, Commonwealth Department of Social Services and Victorian Government Multicultural Affairs and Social Cohesion
Status: ongoing; protocol published

Preventing sexual assault on campus: women's empowerment and safety through education and action (WEACT)

Leesa Hooker, Jessica Ison, Angela Taft, Felicity Young; in collaboration with Kirsty Forsdike, La Trobe Business School; Elli Darwinkel, Monash University; Fiona Marshall, Monash University; Charlene Senn, University of Windsor, Canada

Young women on campus experience unacceptably high rates of avoidable rape / attempted rape by male acquaintances. More than 50% of Australian university students have experienced sexual harassment and 7% have been sexually assaulted in university settings. The Canadian Enhanced Assess, Acknowledge, Act (EAAA) program reduced campus completed rape and attempted rape by 50% (Senn et al., 2015), and sustained two years post-training (Senn, 2017).

The WEACT project aims to: assess the feasibility of implementing the EAAA sexual assault resistance education program into the Australian University context (recruitment, retention, fidelity); explore the acceptability of resistance education (and evaluation methods) for female students; improve student knowledge and self-efficacy of sexual assault; and reduce the incidence of sexual assault/rape experienced by students. Interviews were conducted with 31 Safer Community staff across Australia. Pilot evaluation data will support a grant application for a national women's empowerment (WEACT) project evaluation.

Funding: Transforming Human Societies RFA
Status: project ongoing; manuscripts in progress

RESPOND: Community action to address alcohol and other drug-facilitated sexual violence in the Bendigo region

Leesa Hooker, Jessica Ison; in collaboration with Kirsty Forsdike, Jacqui Theobald, Anne-Marie Laslett, Alex Donaldson, Elena Wilson, La Trobe University; Ingrid Wilson, Singapore Institute of Technology; in partnership with the Centre Against Sexual Assault Central Victoria

This project is building community capacity to prevent and respond to alcohol and other drug-facilitated sexual violence in the Greater Bendigo region. Through multi-stakeholder participatory action and co-design, the project is developing and evaluating a community-based program that can support the diverse Bendigo community to prevent and appropriately respond to alcohol and other drug-facilitated sexual violence.

In 2022, the team conducted a concept mapping exercise with stakeholders. This was followed by a World Café forum in the Bendigo region. The team also undertook a scoping review on alcohol and other drug-facilitated sexual violence. Data collection is complete, with analysis and resource development underway.

Funding: Crime Prevention Innovation Fund, Victorian Government
Status: project ongoing; manuscripts in progress

Alcohol and other drug-facilitated sexual violence across Victoria

Jessica Ison, Leesa Hooker; in collaboration with Kirsty Forsdike, Jacqui Theobald, Anne-Marie Laslett, Alex Donaldson, Elena Wilson La Trobe University

Alcohol and other drug-facilitated sexual violence is a pervasive issue which can have lasting impacts on victim-survivors. However, it is under researched in Australia and internationally. Further, there is little knowledge on how victim-survivors experience the service system and where improvements could be made. This project aims to address this evidence gap in service provision. Through interviews with key stakeholders in the service system, the project will map out where improvements could be made to ensure victim-survivors are supported and cared for.

Funding: La Trobe University Postdoctoral Research Fellowship
Status: project ongoing; manuscripts in progress

Image credit La Trobe University

Training healthcare providers to respond to intimate partner violence against women

Leesa Hooker, Sonia Reisenhofer; in collaboration with Naira Kalra, Johns Hopkins University, USA; Gian Luca Di Tanna, University of London, UK; Claudia Garcia-Moreno, Department of Reproductive Health and Research, World Health Organization, Switzerland; Cochrane Developmental, Psychosocial and Learning Problems

Training healthcare providers on intimate partner violence and on responding to survivors of abuse is one approach that may improve providers' knowledge, attitudes and the care and health outcomes for survivors. Yet there is limited evidence on what interventions are effective to improve provider knowledge and practice.

This Cochrane Systematic Review aims to assess the effectiveness of training programs that seek to improve healthcare providers' identification of, and response to, intimate partner violence against women – compared to no intervention, wait list, placebo or usual care.

Funding: N/A
Status: project complete; Cochrane review published

UNFPA partnership to develop a national curriculum and system supports for health providers responding to gender-based violence in Timor-Leste

Kayli Wild, Guilhermina de Araujo, Angela Taft, Felicity Young, Leesa Hooker; in collaboration with Linda Kelly, and Eileen Christou, Institute for Human Security and Social Change; Lidia Gomes, National University of Timor-Leste Timor-Leste

JLC, in collaboration with La Trobe's Institute for Human Security and Social Change, were successful in a competitive tender for a multi-year partnership with the United Nations Population Fund (UNFPA). The partnership will strengthen the ability of health systems to respond to women and children experiencing violence in the Asia-Pacific, with an initial focus in Timor-Leste and Papua New Guinea. In 2021 we began work in Timor-Leste, together with UNFPA, the Ministry for Health, National Institute for Health and non-government organisations. In 2022 we worked together with Timorese partners and developed a National in-service curriculum, co-designed models of system support and evaluation, and mentored a group of National trainers as they began roll out capacity building in district health services. The La Trobe-UNFPA collaboration demonstrates the significant potential of university and industry partnerships for scaling up approaches to addressing global human development problems; approaches that are based on the synthesis of international evidence, carefully tailored to contextual realities in different settings, and are locally owned and led.

Funding: UNFPA
Status: ongoing

Supporting the health system response to violence against women and children in Timor-Leste

Kayli Wild, Angela Taft, Leesa Hooker; in collaboration with Lidia Gomes, National University of Timor-Leste, Timor-Leste; Angelina Fernandes, Cristal Institute, Timor-Leste; Guilhermina de Araujo, Institute for Human Security and Social Change, La Trobe University; Luisa Marcal, PRADET Timor-Leste

We collaborated with the two main nursing and midwifery training Universities in Timor-Leste to adapt and pilot the World Health Organization's (WHO) new curriculum on responding to violence against women in low resource health systems. The outcomes from this work have provided the foundation for national systems-level approaches in Timor-Leste and have fed back into WHO's global curriculum. The successive pilots showed a significant improvement to nursing and midwifery students' knowledge, attitude and confidence in responding to violence against women and children, after training and sustained at 6-months follow-up. Following advocacy by our Timorese midwifery leaders, the Ministry of Higher Education has made responding to violence against women a core subject in all accredited midwifery programs nationally. We have now provided professional development and mentoring to lecturers at all six universities in Timor-Leste that offer nursing, midwifery and public health degrees. In 2022, the pre-service university curriculum was finalised, and collaboration between La Trobe University, the Ministry of Health and UNFPA commenced to adapt the curriculum for health provider in-service training, with expected delivery in 2023.

Funding: ARC DECRA (DE170101454), WHO Geneva, Rotary Foundation (Rotary Manningham and Dili Lafaek)
Status: completed. The curriculum and supporting resources are available at https://www.latrobe.edu.au/jlc/research/reducing-violence/timor-leste

Women's health and safety study: fertility, domestic violence and women's experiences of health services in Timor-Leste

Kayli Wild, Angela Taft; in collaboration with Linda Kelly and Guilhermina de Araujo, Institute for Human Security and Social Change, La Trobe University; Lidia Gomes and Joao Martins, National University of Timor-Leste, Timor-Leste; Angelina Fernandes, Cristal Institute, Timor-Leste

This study documents the stories of 28 women who have experienced domestic and sexual violence in Timor-Leste to better understand the relationship between fertility and violence, how women enhance their own safety and sources of vulnerability and resilience. In-depth audio interviews with women were used to construct audio-visual learning resources, which were included in health provider training and informed models of survivor-centred care based on the lived-experience and expressed needs of women. In 2022, our Timorese researcher Guilhermina de Araujo, received a Charles Darwin University International Alumni Award special commendation for her work on combatting gender-based violence in Timor-Leste.

Funding: ARC DECRA (DE170101454)
Status: Completed; a series of policy briefs were developed for the Ministry of Health (barriers to accessing family planning for survivors of violence) and the UN Spotlight Initiative (interventions women want and addressing the needs of vulnerable women and children during COVID-19). The study was published in 2022.

Nurses and midwives delivering telehealth interventions in antenatal, postnatal, child and family health, and paediatric hospital settings: a systematic review.

Catina Adams, Jen Austerberry, Stefanie Zugna

A systematic review to answer the following questions:

- What telehealth interventions are used by nurses and midwives in antenatal, postnatal, child and family health, and paediatric hospital settings?
- What are the facilitators for nurses and midwives to adopt telehealth interventions?
- What are the obstacles for nurses and midwives to adopt telehealth interventions?

Funding: La Trobe University Telehealth Curriculum Development Support Grant Application
Status: underway, registered with Prospero CRD42022356920

Telehealth education for undergraduate and postgraduate nurses and midwives: a systematic review.

Catina Adams, Jen Austerberry, Stefanie Zugna

A systematic review to answer the following questions:

What are the best methods of teaching nursing and midwifery undergraduate and postgraduate students' skills and techniques in telehealth delivery?

Funding: La Trobe University Telehealth Curriculum Development Support Grant Application
Status: underway, registered with Prospero CRD42022358942

Parenting support for neurodivergent parents - a systematic review.

Catina Adams, Breana Reesby

A systematic review to answer the following questions:

- How are neurodivergent parents supported by healthcare practitioners, particularly child, family and community nurses?
- Do neurodivergent parents have different parenting support needs?
- What communication and engagement strategies work best for neurodivergent parents?

Funding: La Trobe University ABC Accelerator Grant
Status: underway, lodged with Prospero 378361

COLLABORATION

Centre for Research Excellence to Promote Safer Families

Angela Taft; in collaboration with Kelsey Hegarty, Stephanie Brown, Cathy Humphreys, Kerry Arabena, Lena Sanci, the University of Melbourne; Harriet MacMillan, McMaster University, Canada; Gene Feder, University of Bristol, UK; Karen Glover, South Australian Health and Medical Research Institute; Peter Anderson, Murdoch Children's Research Institute

JLC CRE Scholars - Leesa Hooker, Ingrid Wilson, Sonia Reisenhofer

The Centre of Research Excellence(CRE) to promote Safer Families (Safer Families Centre) is the first dedicated Centre to lead research into the health effects of domestic violence and abuse and the health sector policy and practice responses needed to improve the safety, health and well-being of women, children and young people. The Centre has been funded for five years (2017 – 2022 with a recent six-month extension) to research and collaborate to transform the health sector response to domestic violence and abuse.
https://www.saferfamilies.org.au/

Recent research from the Safer Families CRE includes the TRANSFORM project (see Child, Family & Community stream), policy briefs and a range of meta-syntheses work that builds on previous reviews and provides ongoing guidance for healthcare providers when responding to and caring for people experiencing domestic violence.

Funding: NHMRC CRE
Status: ongoing; one paper published in 2022

Supporting the Readiness of Regional Sports to prevent and respond to Family Violence and Violence Against Women (RRPV)

Jessica Ison, Leesa Hooker; in collaboration with Kirsty Forsdike (Project Lead), La Trobe University

Violence against women in sport is an area of concern. This project will develop guideline implementation initiatives that ensure regional sports settings understand how to undertake primary prevention of, and where required respond to, family, sexual and domestic violence and violence against women both in sport and through sport in a gender-sensitive manner. The project brings together research, content and context expertise in organisational prevention of and responses to family, sexual and domestic violence and violence against women, the primary prevention of and response to family, sexual and domestic violence and violence against women specialist sector (including those working with men), and Regional Sports Assemblies with their networks of community sports clubs, leagues and associations, local recreation facilities, and local stakeholders.

This project aims to build the capacity of regional community sport and recreation to prevent and respond to Family Safety Victoria and violence against women both in sport and through sport in collaboration with their regional communities.

Funding: preventing violence through sport grant program, Victorian Government
Status: project ongoing; ethics approval and data collection commenced.

Generalised Health Curriculum for Sexual and Gender-based Violence Papua New Guinea

Felicity Young, Leesa Hooker, Kayli Wild; in collaboration with Linda Kelly, Lisa Denney and Allan Illingworth, Institute for Human Security and Social Change, La Trobe University; Pamela Kamya, PNG-SGBV Consultant

In 2021, La Trobe University was selected as a partner by UNFPA Asia Pacific to provide research and technical support on the health sector response to sexual and gender-based violence (SGBV). In 2022, UNFPA funded the team to undertake a scoping study to understand how SGBV is currently addressed in both pre- and in-service health curricula, and to map critical partnerships that will support leadership on this issue in Papua New Guinea. The scoping study also included review of international SGBV curricula to distil the core components of best practice and lessons learned from other countries in the Asia Pacific region. The project aims to work in partnership with organisations in Papua New Guinea to co-develop curricula across sectors and strengthen sustainable systems to support the health system response to SGBV.

Funding: UNFPA
Status: ongoing

Intimate Partner Violence Nurse Education in the USA

Leesa Hooker, in collaboration with Camille Burnett, Virginia Commonwealth University, USA; Donna Schminkey, James Madison University, USA; Lorraine Bacchus, London School of Hygiene and Tropical Medicine, UK.

Involving colleagues from the Nursing Network on Violence against Women International, this USA based collaborative study set out to explore IPV education across the American Association for the Colleges of Nursing (AACN) affiliated schools of nursing. We aimed to determine 1) if they offer any training of students at the undergraduate or graduate level in identifying and responding to IPV; 2) if so, what are the components of that training, outcomes, and satisfaction with the existing approach; 3) if not, what are the individual and institutional level barriers to offering this training; and 4) if schools are interested in incorporating best practice, IPV training content into their curriculum.

Our findings support the need for comprehensive IPV curriculum models that can be utilized across nursing educational levels. There was insufficient on-site expertise to create and incorporate IPV curricula into existing structures. Professional organizations in nursing education and accrediting bodies need to make development of IPV curricular a priority for the future of nursing locally and globally.

Funding: N/A
Status: project complete; paper published in 2022

Sexual violence research with LGBTQ+ communities

Jessica Ison, in collaboration with Sophie Hines and Bianca Fileborne, University of Melbourne

Research into sexual violence in LGBTQ+ communities has advanced significantly since the 1990s. This research is an attempt to synthesise the body of research in order to draw out how research has changed and where gaps still exist.

This study includes a scoping review of sexual violence research with LGBTQ+ communities. The search included peer reviewed evidence from 1990 - March 2022. The findings include 125 papers with key themes emerging around sample, context and prevalence. Findings will be used to influence policy on sexual violence and LGBTQ+ communities. They will also be used to advocate for research that is more inclusive of LGBTQ+ communities and the diverse needs of victim-survivors.

Funding: N/A
Status: data analysis complete; writing up findings.

Image Credit La Trobe University

Sexual and reproductive health

Program Leads: Professor Angela Taft
Associate Professor Kristina Edvardsson

Sexual and reproductive health is a human right and planned parenthood confers significant health benefits for women and their families. This program of work addresses sexual and reproductive health and the desire by women and pregnancy-capable people, and their families to effectively control their fertility and maximise their opportunities for a planned and wanted pregnancy and birth.

We use both epidemiological and ethnographic methods to investigate the prevalence of, attitudes to, and use of contraception, emergency contraception, the measurement of and extent of reproductive coercion and safe and unsafe pregnancy termination in Australia and other countries (e.g. Timor Leste and Ghana). We aim to improve the access, equity, effectiveness, quality and affordability of sexual and reproductive health services.

In 2022 the team had several highlights:

- Angela Taft was formally farewelled, and her contributions to La Trobe University recognised through a 'Festschrift' and retirement celebration. Adjunct Prof. Taft will continue to support the team in a mentoring capacity.
- four members of our team attended and presented at the Children by Choice Abortion and Reproductive Rights Conference, Brisbane, August 4-5, (K Edvardsson, A Taft, L Hooker, D LaGrappe)
- we welcomed two new PhD students, Brianna Pike and Genevieve Edwards (supervised by K Edvardsson and L Hooker)
- our NHMRC-supported PhD student Desireé LaGrappe was shortlisted for a prestigious Fulbright scholarship (outcome 2023).
- the team contributed to the SPHERE CRE Women's Sexual and Reproductive Health COVID-19 Coalition Consensus Statement on Reproductive Coercion, https://www.spherecre.org/coalition-outputs

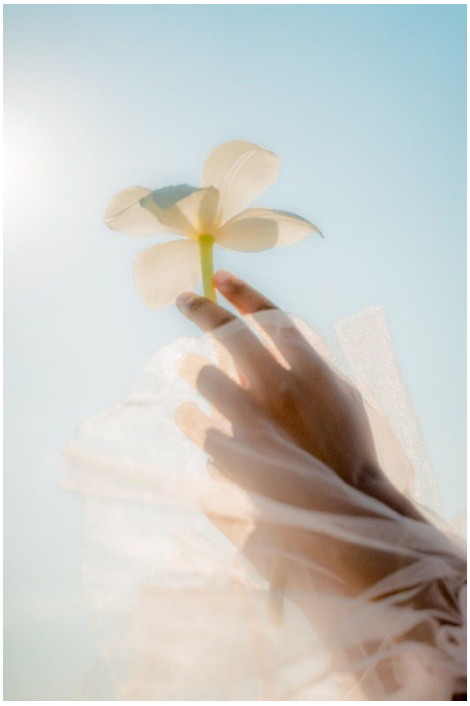


Image credit Ron Lach- Pexels

The prevalence and variations in unintended pregnancy by socio-demographic and health-related factors in a population-based cohort of young Australian women

Angela Taft, Kristina Edvardsson, Leesa Hooker; in collaboration with Mridula Shankar, University of Melbourne; Wendy V Norman, University of British Columbia, Canada

Unintended pregnancy is an important population-level indicator of access to essential sexual and reproductive health services. Examining which population sub-groups have higher exposure to unintended pregnancies and understanding why that is the case is critical to guide equity-focused public health responses to close gaps in service delivery and access.

In this study, we aim to estimate the prevalence of unintended pregnancy and associated socio-demographic and health-related factors among a national cohort of young Australian women. We also examine pregnancy outcomes among women with a history of unintended pregnancy by urban and rural residence, and factors associated with recent experience of unintended pregnancy in the previous year. We utilise data from three waves (2013-2015) of the Australian Longitudinal Study on Women's Health (ALSWH) new young cohort. More information about ALSWH can be found here: https://alswh.org.au/

Funding: NHMRC SPHERE CRE (seed funding)
Status: completed; findings presented at the Children by Choice Abortion and Reproductive Rights Conference, Brisbane, August 4-5, 2022 (A Taft)

Testing a methodological approach for measuring agreement across data sources and trends in the incidence and methods of induced abortion by characteristics of young women in Australia using self-report and linked administrative health data

Kristina Edvardsson, Leesa Hooker, Angela Taft; in collaboration with Mridula Shankar, University of Melbourne, Kirsten Black and Deborah Bateson, University of Sydney; Wendy V Norman, University of British Columbia, Canada; Katrina Moss, University of Queensland; Melissa Harris, Nick Egan, Peta Forder, University of Newcastle

Induced abortion is a common reproductive experience for women in Australia and is recognised as an essential service. Presently abortion data for public health planning and assessment is limited, and there is no national routine data collection on abortions. In this study, we will develop a method (algorithm) to identify abortion events using self-report surveys and three administrative datasets. The algorithm will form a key to several sub-studies undertaken by the team and collaborators.

We utilise self-reported abortion data from six waves of the ALSWH's new young cohort (2013-2019) and its linkages with the Medicare Benefits Schedule, Pharmaceutical Benefits Scheme and the National Morbidity Hospital Database to: (1) evaluate levels of agreement between self-report and administrative data, and (2) test a measurement approach for ascertainment of abortion method, time trends in method distribution and characteristics associated with method type among this sample of young women.

Funding: La Trobe University, ABC grant
Status: approval for use of linked data obtained from ALSWH and state/territory ethics and data custodians

Image credit Karolina Grabowska, Pexels

Trends and factors associated with prior abortion at time of childbirth among childbearing women in Victoria, Australia, 2010-2019

Kristina Edvardsson, Leesa Hooker, Xia Li, Angela Taft; in collaboration with Mridula Shankar, University of Melbourne; Kirsten Black, Deborah Bateson, University of Sydney; Wendy V Norman, University of British Columbia, Canada

Nearly half of all pregnancies worldwide are unintended, and many of these unintended pregnancies end in induced abortion. Robust data on abortions are needed for tailored public health responses that include equitable access to contraception and abortion care.

In this study, we aimed to fill an important data gap by examining the prevalence of a history of induced abortion among individuals giving birth in Victoria, and changes in prevalence by time and sociodemographic characteristics. We analysed population-based perinatal data obtained from the Victorian Perinatal Data Collection. The dataset included a total population sample of women experiencing a childbirth in Victoria, Australia years 2010 to 2019 (n=767 055).

Funding: N/A
Status: preliminary findings presented, Children by Choice Abortion and Reproductive Rights Conference, Brisbane, Australia, August 4-5, 2022 (K Edvardsson); paper submitted.

Global variations in the underreporting of induced abortion: A systematic review

Kristina Edvardsson, Leesa Hooker, Felicity Young, Angela Taft; in collaboration with Mridula Shankar, University of Melbourne; Kirsten Black, Deborah Bateson, University of Sydney; Melissa Harris, University of Newcastle; Wendy V Norman, University of British Columbia, Canada

An important consideration when using abortion data to estimate prevalence and incidence is the extent of completeness of data. Data on induced abortions are susceptible to underreporting due to stigma and social disapproval of the procedure. In this systematic review, we will explore the worldwide variation in the underreporting of induced abortions by individuals. We will also investigate if and how underreporting of induced abortions changes over time and by age cohort, vary by survey methodology or design, country or regional context, or sociodemographic characteristics. A total of 6810 records across five databases have been identified for initial screening, and 167 full text papers assessed for eligibility.

Funding: N/A
Status: systematic review protocol registered (Prospero); review ongoing

Reproductive coercion: Defining the domain and developing a comprehensive and validated prevalence measure

Desireé LaGrappe, Angela Taft, Leesa Hooker, Kristina Edvardsson; in collaboration with Laura Tarzia, University of Melbourne

Reproductive coercion, or reproductive coercion and abuse, describes controlling behaviours infringing on autonomy over reproductive health decisions about pregnancy, abortion, and/or contraceptive use. This type of abuse is a distinct form of gender-based violence, overlapping with domestic, family, and sexual violence. Public health policies and interventions to address reproductive coercion are beginning to advance to scale, yet neither an internationally accepted definition nor a comprehensive, validated measure are available.

The lack of a conceptually clear and consistently used definition and measure threatens the ability to make progress in understanding and preventing reproductive coercion and its harm. To address this public health research gap, this study will develop a new rigorous and comprehensive reproductive coercion measure, with an overall goal to pilot prevalence in Australian Maternal and Child Health (MCH) and General Practice primary care settings.

This research is a part of SPHERE, the NHMRC Centre of Research Excellence in Sexual and Reproductive Health for Women in Primary Care.

Funding: Postgraduate Scholarship (NHMRC Project GNT2013949)
Status: ongoing; findings presented at the Australian Society for Psychosocial Obstetrics and Gynaecology Scientific Meeting and the Perinatal Society of Australia and New Zealand Congress in 2022

COLLABORATIVE WORK

SPHERE -The Centre of Research Excellence in Sexual and Reproductive Health for Women: Achieving Better Outcomes through Primary Care

Angela Taft, Kristina Edvardsson; in collaboration with Danielle Mazza, Jane Fisher and Safeera Hussainy, Monash University; Kirsten Black, Jayne Lucke and Kevin McGeechan, University of Sydney; Marion Haas, UTS; Wendy Norman, University of British Columbia, Canada

Australian women continue to have poor sexual and reproductive health, which impacts on them, their families and the broader community. SPHERE has identified the following aims:

- improving the delivery of preconception care to optimise pregnancy outcomes
- increasing understanding, awareness and uptake of long-acting reversible contraception (LARC)
- increasing access and service provision of medical termination of pregnancy.

Consequently, SPHERE has developed a research program that is focused on three important areas of women's sexual and reproductive health: abortion, contraception, and preconception care.

The Australian contraceptive choice project (ACCORd)

Angela Taft; in collaboration with Danielle Mazza, Monash University; Kirsten Black, Jayne Lucke, Kevin McGeechan, University of Sydney; Marion Haas, UTS; Jeff Piepert, Washington University, USA

International evidence demonstrates that long-acting reversible contraceptives (LARCs) are the most effective method to reduce unplanned pregnancy and abortion. Despite this, in Australia rates of LARC use remain low compared with less-effective forms of contraceptives. Our cluster randomised controlled trial was based on the successful US Contraceptive CHOICE Project. It tested a complex intervention in general practice consisting of online training for effectiveness-based contraceptive counselling for general practitioners, and access to rapid referral for LARC insertion clinics. The ACCORd study resulted in a significantly higher rate of LARC insertions in the intervention group compared with control.

Funding: NHMRC
Status: completed, outcomes paper published in *Am J Obstet Gynecol*. Between 2000 and 2022 four papers were published on satisfaction with LARCs, a two-year follow-up protocol, process evaluation, and economic impact

Transition to contemporary parenthood – preparation and support

Program Leads: **Professor Jan Nicholson**
Associate Professor Amanda Cooklin

The Transition to Contemporary Parenthood Program – Preparation and Support (TCPP) was established in 2013 as the result of a major gift from Mrs Roberta Holmes. TCPP undertakes innovative research to identify the best ways to support mothers and fathers in their roles as parents.

The program examines the influence of contemporary factors on parents and how these affect children's healthy development. This information is then used to guide the design of new or improved programs and supports for parents.

Much of our work involves long-standing collaborations, especially with The Australian National University, Deakin University, Murdoch Children's Research Institute, the Parenting Research Centre and Queensland University of Technology.

EHLS at School: school-age follow-up of the Early Home Learning Study

Jan Nicholson, Shannon Bennetts, Jasmine Love, Clair Bennett; in collaboration with Elizabeth Westrupp, Deakin University; Donna Berthelsen, Queensland University of Technology; Naomi Hackworth, Parenting Research Centre; Fiona Mensah, Murdoch Children's Research Institute; Sheena Reilly, Griffith University; Lisa Gold; Deakin University; Penny Levickis, University of Melbourne

The original *Early Home Learning Study* (EHLS) evaluated the *"smalltalk"* parenting program, which was designed to support parents to create an enriched home learning environment for their young children. The study involved over 2,000 families with half participating in parent groups (for parents of infants) and half in playgroups (for parents of toddlers). The evaluation was conducted by the Parenting Research Centre, in partnership with and funded by the Victorian Department of Early Education and Childhood Development from 2010–2013.

Around five years later, the *EHLS at School* study followed up over 600 of the families who participated in the playgroups program, when their child was aged 7—8 years. The study aims to evaluate the longer-term outcomes of *smalltalk*, including impact on children's school readiness, language and literacy development.

Funding: National Health and Medical Research Council (NHMRC Partnership GNT1076857), together with the Victorian Government Department of Department of Families, Fairness and Housing (DFFH)

Status: completed; two papers published in 2022; four papers previously published

Implementing and evaluating place-based initiatives for children

Fiona Burgemeister, Jan Nicholson, Sharinne Crawford, Stacey Hokke, Lisa Amir; in collaboration with Naomi Hackworth, Parenting Research Centre

Place-based initiatives target defined geographic areas, and aim to improve child and family wellbeing through providing coordinated programs and services tailored to local need. This mixed methods study 1) examined the strength of the evidence for the effectiveness of place-based initiatives in improving outcomes for children, their families and the communities in which they live; and 2) explored the knowledge, attitudes, and experiences of personnel implementing evidence-based programs in *Communities for Children,* an Australian place-based initiative.

Methods included a scoping review of 12 place-based initiatives, interviews with 17 *Communities for Children* government personnel and a survey of 205 *Communitiesfor Children* community personnel. Contextual, organisational, program and individual factors were found to influence the implementation of evidence-based programs within *Communities for Children*. This research was supported by the Australian Government Department of Social Services who have been using the findings to inform program and workforce development.

Status: completed; three papers published in 2022; one paper previously published; PhD thesis awarded 2022

Media reporting of 'stranger danger' and other factors relating to children's independent mobility

Sharinne Crawford, Shannon Bennetts, Jan Nicholson, Amanda Cooklin; in collaboration with Naomi Hackworth and Julie Green, Parenting Research Centre; Stephen Zubrick, University of Western Australia

Children's independent mobility has important health, social and emotional benefits, however parents commonly act as 'gatekeepers', restricting or encouraging their child's independence. The media may contribute to parents' perception of risk to children and provides a reference point for parents' decision-making around children's independent mobility.

This study evaluated the media climate during a three-month period in 2013 when 1,779 Victorian parents of children aged 9 to 15 years reported on their attitudes towards children's independent mobility via telephone interview. We examined print, online and television news reports of the risks and benefits of children's independent mobility over this period and compared the media coverage to parents' ratings of concern about their child's independent mobility.

Funding: La Trobe University Social Research Assistance Platform

Status: completed; one paper published in 2022; three papers and a report previously published

Parenting in the age of social media: opportunities or disruptions?

Sharinne Crawford, Stacey Hokke, Amanda Cooklin, Shannon Bennetts, Jan Nicholson; in collaboration with Kimberley Mallan, Australian Catholic University; Tess Crane, School of Psychology and Public Health, La Trobe University

Parents are increasingly looking to social media for information and support during the transition to parenthood. Social norms and peer support are well established drivers of parents' wellbeing and parenting self-efficacy, yet how this operates – protectively or otherwise – via social media is unclear.

Applying a Social Norms theoretical framework, this study aims to investigate the influence of social media on Australian parents' experiences of early parenthood, social and emotional wellbeing and parenting self-efficacy, as well as shaping parenting attitudes, decision-making and behaviours. The mixed methods research was conducted in two phases: qualitative interviews with 24 parents and expectant parents were followed by a quantitative online survey of 621 parents and expectant parents.

Funding: La Trobe University Transforming Human Societies Research Focus Area

Status: completed; one paper under review; findings presented at the Australian Institute of Family Studies Conference and the International Conference on Social Media + Society in 2022

Parenting, parent wellbeing and child development in Australia

Jan Nicholson, Amanda Cooklin, Stacey Hokke, Clair Bennett, Jasmine Love, Shannon Bennetts; in collaboration with Lyndall Strazdins and Liana Leach, Australian National University; Rebecca Giallo and Elizabeth Westrupp, Deakin University

Growing Up in Australia, the *Longitudinal Study of Australian Children* (LSAC) collects data every two years on 10,000 Australian children and their parents. The study is funded by Commonwealth Department of Social Services, managed by the Australian Institute of Family Studies, with data collected by the Australian Bureau of Statistics. Jan Nicholson is a founding member of the LSAC Scientific Advisory Committee and Chair since 2019; Amanda Cooklin is a current member of the Scientific Advisory Committee.

This ongoing program of analytic work uses LSAC data to build understanding of the contemporary issues affecting the health and wellbeing of mothers and fathers, and how this affects family functioning and shapes children's development. We examine a range of common child outcomes including socio-emotional adjustment, self-regulation, language, cognitive development and weight.

Funding: Roberta Holmes Donation
Status: ongoing; over 50 papers published using LSAC data

Parenting, Pets & Pandemic: exploring the role of pets for families with children during COVID-19

Shannon Bennetts, Sharinne Crawford, Jan Nicholson, Fiona Burgemeister; in collaboration with Tiffani Howell, Brian Ignacio, School of Psychology and Public Health, La Trobe University; Kylie Burke, Metro North Health Service – Mental Health, Queensland; Catherine Chamberlain, University of Melbourne

The global COVID-19 pandemic caused widespread and significant changes to the ways that we work, live, and study, disrupting opportunities to engage in social connections that help keep us mentally well. Parents and children have spent more time at home together with their pets, and there has been enormous demand for pet adoptions.

Conducted between July and October 2020, this national parent survey aimed to understand how families with children were spending time with their cats and dogs, including new pets; associations between pet attachment and mental health; and benefits and challenges of having children and a cat or dog during the pandemic.

Funding: Roberta Holmes Donation
Status: completed; two papers published in 2022

Image credit Monkey Business Images, Shutterstock

Rural workforce perspectives on trauma-informed primary health care: Service approaches inclusive of Aboriginal and Torres Strait Islander parents

Carol Reid, Shannon Bennetts, Lisa Amir; in collaboration with Catherine Chamberlain, University of Melbourne

Trauma-informed service delivery recognises the physical, psychological, social, and emotional impact of traumatic events and acknowledges intersectional contexts around gender, culture, and historical issues of traumatic stress responses. This research, situated within the *Healing the Past by Nurturing the Future* project, examines rural workforce perspectives of trauma-informed primary health care in northern Victoria, Australia.

A three-phase, sequential, explanatory mixed-methods design was used, comprising survey tool development and validation, an online survey, and a workshop with members of the rural primary health care workforce. Results identified barriers that were primarily system-based, including narrow program funding parameters, restrictive models-of-care, referral pathway limitations and responses to parents that are reliant on mental health care plans. Enablers included workforce in-depth knowledge of complex trauma, positive attitudes, motivation to improve trauma-informed service provision, and opportunities for local organisational collaboration.

Funding: Healing the Past by Nurturing the Future PhD Student Scholarship (NHMRC Project GNT1141593)
Status: completed; two papers published in 2022; one paper published previously

COLLABORATIVE WORK

Calm Kids: a large-scale randomised controlled trial of the treatment of comorbid anxiety in children with ADHD to improve outcomes

Jan Nicholson; in collaboration with Emma Sciberras, Deakin University; Harriet Hiscock, Vicki Anderson, Daryl Efron, Murdoch Children's Research Institute; Ron Rapee, Macquarie University

Comorbid anxiety affects up to 50% of children with ADHD (Attention Deficit Hyperactivity Disorder) and often goes undetected and untreated. This is of concern given that anxiety exacerbates the impairments experienced by children with ADHD. Practical approaches that improve outcomes for children with ADHD are sorely needed. Identifying and managing comorbid anxiety may be one such approach. This randomised controlled trial aims to determine whether a 10-session cognitive behavioural therapy (CBT) intervention is effective in improving anxiety and wellbeing for children with ADHD and comorbid anxiety aged 8–12 years. Eligible children will be randomised to the anxiety intervention group (10 sessions of CBT over 12 weeks) versus usual care from their paediatrician.

Funding: NHMRC Project Grant GNT1082232
Status: ongoing; one paper previously published

Children's Attention Project: longitudinal study of children with and without ADHD

Jan Nicholson; in collaboration with Emma Sciberras and Tim Silk, Deakin University; Daryl Efron, Vicki Anderson, Murdoch Children's Research Institute, Royal Children's Hospital and University of Melbourne; Phillip Hazel, University of Sydney; Obi Ukuommune, University of Exeter, UK; Brad Jongeling, Joondalup Child Development Centre, Perth

The Children's Attention Project is a longitudinal study of a community sample of children with and without ADHD (Attention Deficit Hyperactivity Disorder), examining the long-term effects of ADHD on children's behaviour, learning and day-to-day living. It includes an assessment of the influence of parenting and parent wellbeing on outcomes for these children. Children have been tracked from ages 6–8 to 10–11 years, with a subgroup who participated in a nested neuroimaging study.

Funding: NHMRC Project Grants GNT1065895, 2014-2018; 1008522, 2011–2015
Status: data collection completed; one paper published in 2022; 23 previous publications

DonateLife: exploring young people's knowledge, attitudes and perceptions of organ donation

Stacey Hokke; in collaboration with Brooke Huuskes, School of Agriculture, Biomedicine and Environment, La Trobe University

Young people (aged 18-35 years) are one of the most under-represented groups on the Australian Organ Donor Register. Using a qualitative study design, this project aims to explore the factors, informational needs and messaging preferences that may influence young people's motivations to register as an organ donor. Findings will provide insight into the key drivers and barriers of donor registration and can be used by the Organ and Tissue Authority to inform and enhance future community engagement and education targeted to young Australians.

Funding: Organ and Tissue Authority Community Awareness Grant 2022
Status: data collection complete; report and publication in preparation

Let's Grow: maximising health potential through enhancement of movement behaviours from early life

Jan Nicholson and Sharinne Crawford; in collaboration with Kylie Hesketh, Jo Salmon, Liliana Orellana, Mohamed Abdelrazek, Harriet Koorts and Victoria Brown, Deakin University; Barbara Gelland and Rachel Taylor, University of Otago

Low levels of physical activity, high sedentary behaviour and insufficient sleep during early childhood are each associated with poor physical and psychosocial health and all show suboptimal levels from early life. Interventions to improve these behaviours seldom consider all three together. In this study, we evaluate the efficacy, maintenance, cost-effectiveness and scalability of an 18-month program to increase physical activity, decrease sedentary behaviour and optimise sleep in 2-year old children. Underpinned by an implementation science approach, scalability and stakeholder input are incorporated into all aspects to increase potential translatability into real-world practice.

Funding: NHMRC Project Grant GNT1162980
Status: in progress; one paper published in *BMJ Open* (2022)

More Than A Landlord: Responding to Aboriginal and Torres Strait Islander family aspirations to foster self-determination and social and emotional wellbeing

Jan Nicholson; in collaboration with Gregory Armstrong, Alison Brown, Rebecca Ritte, Kelsey Hegarty, Lea Waters, Kristy Meiselbach, University of Melbourne; Yin Paradies, Lata Satyen, Elizabeth Doery, Deakin University; Stephanie Brown, Graham Gee, Fiona Mensah, Murdoch Children's Research Institute; Darren Smith, Samantha French, Aboriginal Housing Victoria

More Than A Landlord is an innovative life coaching program that supports Indigenous families to articulate and achieve their short, medium and long-term aspirations. It seeks to promote social, emotional and cultural wellbeing (SEWB) by assisting parents, carers and children to set and achieve personal goals that will improve their lives. Life coaching is offered to Aboriginal Housing Victoria tenants in three urban areas: Mornington Peninsula, Healesville and northern metropolitan Melbourne. This Indigenous designed and led approach uses a strengths-based framework that supports self-determination with and for Indigenous families. The research evaluates its effects on the SEWB of Indigenous parents and their children.

Funding: NHMRC Targeted Research Grant GNT1154619
Status: ongoing; one paper previously published

Suicide prevention among men in early fatherhood: Determining the effectiveness of Working out Dads

Amanda Cooklin, Jan Nicholson; in collaboration with Rebecca Giallo, Deakin University and Murdoch Children's Research Institute; Liana Leach, Australian National University; Jemimah Ride, University of Melbourne; Brian Oldenburg, La Trobe University; Anneke Grobler, Stephanie Brown, Murdoch Children's Research Institute; Catherine Wood, Swinburne University of Technology; Craig Garfield, Northwestern University, USA; and Tweddle Child and Family Services, Melbourne

Designed in partnership with Tweddle Child and Family Services, *Working out Dads* is a suicide prevention intervention targeting men in early fatherhood. The program is a 6-week gym-based peer support program, targeted for fathers experiencing poor mental health or suicidal ideation. Led by Associate Professor Giallo, this project is a randomised controlled trial aimed at generating robust evidence about the effectiveness, cost-effectiveness and scalability of *Working out Dads* as a targeted prevention approach to improve fathers' mental health, social support and help seeking.

Funding: MRFF Million Minds Mission Suicide Prevention Grant (2020–2024)
Status: recruitment in progress; protocol paper published in 2022

'Take A Breath': Implementation of videoconferencing group intervention for parents of ill children

Jan Nicholson; in collaboration with Vicki Anderson, Frank Muscara, and Maria McCarthy, Murdoch Children's Research Institute and Royal Children's Hospital

Parents of a seriously ill or injured child often experience debilitating stress and anxiety. When this persists, it is associated with a range of difficulties for both parents and children. Building on findings from a longitudinal study and a randomised controlled trial, the *Take A Breath* program which seeks to support parenting and prevent parent traumatic symptoms is being rolled out across multiple hospital departments. This project evaluates the processes and experiences of implementation.

Funding: Royal Children's Hospital; Ronald MacDonald House
Status: commenced

Image credit Spencer Selover, Pextels

Work and family

Program Lead: Associate Professor Amanda Cooklin

This program of work aims to understand the role that parents' jobs and employment conditions have on parenting, parent-child relationships and family health and wellbeing.

These issues have become particularly salient since the COVID-19 pandemic. The effects of this disruption on family relationships, health and wellbeing are only just being understood, and we contribute to this growing evidence, taking a gendered lens to understand this.

This program builds on our long-standing collaborations with The Australian National University, Deakin University and the Work-Research Institute at Oslo Metropolitan University, Norway.

Families at work and families at work during COVID-19

Amanda Cooklin, Stacey Hokke, Shannon Bennetts, Jan Nicholson, Sharinne Crawford, Simon Mason, Jasmine Love, Jodi Oakman; in collaboration with Liana Leach and Lyndall Strazdins, Australian National University

The Families at Work study (2016-2017) was focussed on understanding the job conditions linked to optimal health and wellbeing for parents (with children aged 0-18 yrs), including lower work-family conflicts, job stress and burnout. Given the overarching changes to jobs, work, childcare and education in 2020, we invited the same sample to participate in a brief, 6-month prospective study across the peak of the COVID-19 pandemic.

The research aims of Families at Work during COVID-19 are to: establish what workplace supports remained critical for parents, what new risks to parents' health and family wellbeing might be emerging and how these are patterned by gender, socio-economic status and job type.

Funding: Australian Research Council (A Cooklin Future Fellowship FT200100209)
Status: analyses ongoing, data collection completed; 6 papers previously published, one published in 2022

Fathers at work: identifying workplace barriers and supports for fathers to combine work and care

Stacey Hokke, Sharinne Crawford, Shannon Bennetts, Jasmine Love, Jan Nicholson, Amanda Cooklin; with Liana Leach, Australian National University

Gender inequities in work and care persist and have likely been exacerbated by the "she-cession" due to the COVID-19 pandemic. Evidence suggests that fathers' unpaid care work has increased slightly due to the pandemic – but so has mothers', and all parents remain constrained by gendered notions of 'who works and who cares'.

This project aims to explore Australian fathers' work-family experiences to investigate how workplaces have (or have not) supported fathers to combine work and care, before, during and since the pandemic. We use a qualitative phenomenological study design; data are collected using in-depth semi-structured interviews with fathers of child(ren) aged 0–18 years, employed in an organisation.

Funding: La Trobe University Transforming Human Societies Research Focus Area Grant Ready Scheme
Status: data collection completed; findings in preparation; findings presented at two national conferences in 2022, including the Australian Institute of Family Studies Conference

Work family balance, parenting and family health and wellbeing

Amanda Cooklin, Jan Nicholson; in collaboration with Liana Leach, Lyndall Strazdins, Yixuan Zhao, Tianying Wang, Australian National University; Belinda Hewitt, University of Melbourne; Mara Yerkes, Utrecht University, The Netherlands; Rebecca Giallo, Deakin University

This ongoing, collaborative program of research uses available national, longitudinal and cohort data to identify the adverse effects of poor-quality jobs, work-family conflict, and time pressure on families across the life-course.

In 2022, we published four papers. The first investigated the links between time pressure and mental and physical health for recent mothers (child age <5 yrs) participating in the Millennium Mums survey. A second paper used prospective data collected from employees working at home to explore work-family conflict and health. Two further papers used data from the Longitudinal Study of Australian Children, one investigating work-study conflicts and mental health associations for employed (secondary and tertiary) students; and one explored the link between exposure to early-life inter-parental conflict and later socio-emotional development for children.

Funding: Australian Research Council (A Cooklin Future Fellowship FT200100209)
Status: ongoing; 4 papers published in 2022

Image credit Ground Picture, Shutterstock

COLLABORATION

'Upwards support' for managers at work: Does gender and parent status matter?

Amanda Cooklin; in collaboration with Nina Junker and Wendy Nilsen, Oslo Metropolitan University, Norway; Eunae Cho, Taipei Medical University, Taiwan

This project is an international collaboration and aims to investigate whether stereotypes about 'working mothers' influence the support managers receive from their staff in the workplace. Based on gender role theory, we hypothesize that asking for practical support at work may serve as a penalty for women and mothers, but not for men and fathers, in supervisory roles. It is a collaboration between researchers in Germany, Singapore, Norway and Australia, with data collected in each setting to yield cross-national comparisons. In 2022, we completed further fieldwork in Germany and Norway to add to the original sample (collected in 2020) and analyses are underway.

Status: findings in preparation

FLEX-IT: A mixed method study of information technology (IT) use in everyday life

Amanda Cooklin; in collaboration with Nina Junker and Wendy Nilsen, Oslo Metropolitan University, Norway; Eunae Cho, Taipei Medical University, Taiwan

This project is an international collaboration and aims to investigate whether stereotypes about 'working mothers' influence the support managers receive from their staff in the workplace. Based on gender role theory, we hypothesize that asking for practical support at work may serve as a penalty for women and mothers, but not for men and fathers, in supervisory roles. It is a collaboration between researchers in Germany, Singapore, Norway and Australia, with data collected in each setting to yield cross-national comparisons. In 2022, we completed further fieldwork in Germany and Norway to add to the original sample (collected in 2020) and analyses are underway.

Status: findings in preparation

Highlights of 2022

FUSHIA EXPert

> "Our single-hospital staff survey led to a state-wide prospective cohort study..."
>
> Robyn Matthews

In 2015, our research group (the Midwifery and Maternity Services Research Unit) at the Royal Women's Hospital in Melbourne, Victoria was approached by the Clinical Education team to conduct a joint project on midwifery expertise and retention at our service (called the EXPert Study). The education team had identified anecdotally that there was an issue with many midwives leaving the organisation after five years of practice, which could potentially impact the skill mix, as well as lead to staffing deficits. In 2017, we conducted a survey with an overall response rate of 55% of all midwives and nurses. The response rate from the midwives at the was a staggering 97% (257/266), which showed strong engagement from the midwives to have their voices heard.

EXPert – what we found

We confirmed there was truth to the concerns about retention of the midwives with less experience – 61% of the midwives were ten years or less post-qualification. We found that a high percentage of the midwives had burnout, a third (35%) felt adequately acknowledged for the work they do and just under half (44%) needed more support for their work. The majority (83%) of midwives really liked being midwives, but were frustrated at their inability to provide quality care to women and families. One in five were regularly thinking of leaving the profession.

We presented these findings at many national conferences and at the International Confederation of Midwives conference in 2021 with some trepidation, but many midwives spoke to us about how they had similar experiences in their maternity services and how they were feeling the same. Further research in this space was needed.

Next steps

In 2020, Victoria was significantly impacted by the COVID-19 pandemic and extensive lockdown periods. Reports from maternity services and in the media indicated further stress on the midwifery workforce. Given the acuity of the situation, a group of clinical midwives, midwifery academics and midwifery researchers banded together to develop a Victorian state-wide study of the profession to explore the state of the midwifery workforce, factors that may impact the sustainability of the profession, workforce challenges and factors that facilitate wellbeing and a positive view of the profession. The study was called FUCHSIA: FUture proofing the midwifery workforce in Victoria – a statewide Cross-sectional survey exploring Health, wellbeing and SustaInAbility. The FUCHSIA study was composed of surveys of all maternity services managers, midwives in maternity services, privately practising midwives and midwifery students in Victoria. Half of Victorian maternity services managers, 20% of midwives working in maternity services, 43% of privately practising midwives and 29% of midwifery students participated in the study.

FUCHSIA – what we found

We found most managers reported midwifery workforce deficits and they had difficulties recruiting experienced midwives. Similar to the EXPert study findings, there was a retention issue among midwives (61% having ten years or less post qualification), high rates of burnout and almost 40% were thinking of leaving the profession. Midwives were concerned that the state of the midwifery workforce and working conditions in maternity care in Victoria were unsustainable.

Where to from here?

While we have plans to publish our results, we felt our findings and recommendations needed to be shared urgently with maternity services and Victorian stakeholders. So, we created 'The FUCHSIA 2021 Report' which was made publicly available in December 2022 and distributed to all Victorian maternity services (regardless of participation), the Victorian Government, the Australian Nursing and Midwifery Federation and the Australian College of Midwives.

In the original FUCHSIA 2021 survey we asked midwives and midwifery students if they would be interested in participating in further research. Over 400 midwives and students were willing, so we have developed the FUCHSIA Cohort study – a longitudinal study of midwives and midwifery students. This study will survey participants annually for five years and finish in 2025. The second survey was distributed in October 2022, and we had a 69% response rate. In 2026 we plan to re-survey all Victorian midwives and maternity services to deepen our understanding of the profession.

For more details: The FUCHSIA 2021 report

Robyn Matthews

La Trobe Violence Against Women Network (LAVAWN)

The La Trobe Violence Against Women Network (LAVAWN) brings together researchers from across the university who work on issues relating to violence against women, family violence, gender-based violence and other intersecting inequalities

LAVAWN was founded in 2017 by Dr Ingrid Wilson, Professor Angela Taft and A/Professor Leesa Hooker. Ingrid had a vision for a network that brought together researchers from across the university who were passionate about ending violence against women and all forms of violence. Thanks to a chance meeting at the Judith Lumley Centre office, Ingrid and Angela met Jessica Ison, who was then a PhD student at La Trobe. She took on the role of coordinator and together they built the network to 300 members. In this time, the Judith Lumley Centre has always housed and supported the network.

The network holds a monthly seminar to showcase research from across the university and others working in this field. Over the years, it has become a trhiving network with presentations from academics, PhD students, industry partners and international colleagues. In 2022 we had some exciting presentations from the primary prevention of sexual violence, to exploring the impacts of COVID19 on domestic and family violence service provision in CALD and faith-based communities, and questions around ethical research practice.

The network's website also houses information about researchers from across La Trobe so that researchers and industry partners can find an expert. There is also a monthly newsletter that discusses the leading topics in the field and brings important attention to gender-based violence. The network has facilitated important partnerships between industry and research and contributions to key policy reforms such as the Victorian Royal Commission into Family Violence. This includes grant applications, exciting research and industry projects and collaborations.

There has been considerable growth since 2017 and in light of this, and the desire to broaden on our scope, in 2022 we made the decision to rebrand to a focus on gender-based violence. We have renamed to the La Trobe Reducing Gender-based violence Network or ReGeN. Part of this change has seen Dr Jess Ison step up to being Co-Chair with Dr Kirsty Forsdike. Our new coordinator is JLC PhD student Desireé LaGrappe.

Our aim for the future of the network is to see us grow across the university and to solidify our standing as a research network within and outside the academy whilst supporting our burgeoning and established academics in their important research on reducing gender-based violence.

Jessica Ison

Dr Jessica Ison, LAVAWN Coordinator

Image credit, La Trobe University

Comment

Improving outcomes for First Nations mothers and babies in Australia through culturally safe continuity of midwifery care: the time for scale-up is now!

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Helen McLachlan,[a,c] Michelle Newton,[a,c] Fiona McLardie-Hore,[a,b] Pamela (Res) McCalman,[a] and Della Forster [a,b]

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Australia is one of the safest places in the world to give birth. This is not the case for Aboriginal and Torres Strait Islander (hereafter called First Nations) peoples.1 First Nations women are three times more likely to die in childbirth than non-First Nations women, and their babies are almost twice as likely to die in their first year of life. Preterm birth (birth before 37 completed gestational weeks) and being low birthweight (<2500 g) are also both substantially higher for First Nations babies, and are associated with significant morbidity and mortality.[1] Perinatal factors, such as preterm birth, are responsible for 85% of deaths occurring in the first 18 months of life.[2] Despite numerous government recommendations urgently calling for strategies to improve health outcomes for First Nations mothers and babies,[3] as well as a national 'Close the Gap' strategy aimed at reducing neonatal and child mortality,[2,4] to date there has been little improvement.

One strategy that has been effective, and that has demonstrated improvements in health outcomes for mothers and babies, is midwifery continuity of care. Numerous studies have found that midwifery-led continuity is associated with substantially better perinatal health[6] outcomes,[5] and cost savings to the health system.[6] Despite these findings, and the substantially poorer health outcomes experienced by many First Nations women and babies, very few women having a First Nations baby have received continuity of midwifery care.

Our large research translation study (called Baggarrook Yurrongi, meaning 'woman's journey' in Woiwurrung language)[7] evaluated the capacity of four maternity services in Victoria, Australia, to implement, embed, and sustain a culturally specific caseload midwifery model of care. In the caseload model women have midwife-led continuity throughout pregnancy, labour, birth and the early postnatal period with a known midwife. In our study, new culturally specific and tailored caseload models for women having a First Nations baby were successfully implemented in three major metropolitan tertiary maternity services in Melbourne Australia, between 2017 and 2020. The models provided women with collaborative and coordinated care with a known midwife who had received appropriate cultural training and who helped women navigate their journey through the maternity care system. There was a 21-fold increase in access to the model (from 34 First Nations women ever receiving the model within the services to over 700 over a similar time period), and uptake of the model was high (90%).[7] Women were very satisfied with the care, and reported feeling emotionally, culturally and clinically safe and valuing the personalised care provided by a known midwife. This model differs from fragmented mainstream care where First Nations women usually receive care from a number of different and unfamiliar health care providers, and often experience racism.[8] In our study, we also found high rates of breastfeeding initiation and maintenance,[9] reduced smoking in pregnancy, and improved clinical outcomes. Midwives working in the model were also highly satisfied with the work, valuing building close relationships with women and providing continuity of care in a culturally sensitive way. Since completion of the Baggarrook Yurrongi study, the new models have been successfully embedded and sustained in the three hospitals, with the majority (over 400 women) per year having a First Nations baby receiving the culturally tailored continuity of care model.

Another recent study conducted in Brisbane, Australia, also evaluated a culturally specific midwifery continuity of care program like the Baggarrook Yurrongi caseload model for women having a First Nations baby. The program, based on 'Birthing on Country' principles (i.e. models that are co-designed with First Nations people, include a First Nations workforce, partnerships between primary and tertiary services, cultural strengthening programs, and wrap-around services to support pregnant women and their families) reported a 38% reduction in preterm birth and improved infant outcomes and reduced cost.[10]

Despite the strong evidence, government policies[3] and published frameworks to assist services in 'Birthing on Country' implementation,[10] the models are still only available to a small proportion of women having a First Nations baby in a small number of health services.

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E-mail address: h.mclachlan@latrobe.edu.au (H. McLachlan). © 2023 The Author(s). Published by Elsevier Ltd. This is an open access article under the CC BY-NC-ND license (http://creativecommons.org/licenses/by-nc-nd/4.0/).

Scale-up must be prioritised by Australian governments and by health services. Models should be developed in partnership with First Nations people and communities and enabled through utilisation of the RISE framework[10] that is designed to be used as a guide for local implementation. The framework allows for customisation of the model to the local community context through a participatory action process, enabled by strong partnerships and leadership from First Nations people and Aboriginal Community Controlled Health Organisations.[10]

There is little doubt that the urgency to improve health outcomes for First Nations peoples in Australia remains. There is also now clear evidence that culturally specific and tailored midwifery continuity models like Baggarrook Yurrongi and 'Birthing on Country' can help close the gap in the health outcomes between First Nations and non-First Nations peoples. Widespread scale-up must be prioritised to ensure all women having a First Nations baby receive this gold standard model of care. The time for scale-up is now.

Contributors

HMc wrote the first draft of the Commentary and all authors contributed to Commentary revisions. All accept responsibility to submit for publication.

Declaration of interests The authors have nothing to disclose.

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Staff

The Judith Lumley Centre brings together a multi-disciplinary team of researchers with qualifications and experience in epidemiology, women's health policy, education, psychology, historical and social research, biomedical research, consumer advocacy, anthropology, medicine, nursing and midwifery.

We have not listed our field and casual staff here but would like to acknowledge their highly valuable contributions to our projects.

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Higher degree research

PhD graduates 2022

Catina Adams

How does the Enhanced Maternal and Child Health Program in Victoria support women experiencing family violence?

Dr Adams explored the Enhanced Maternal and Child Health program's support of women experiencing family violence. She analysed the roles of the nurse, manager, and wider service system, identifying the interwoven elements of the Enhanced program. Her thesis includes recommendations to strengthen the Enhanced program's response to violence against women.

Supervised by Angela Taft and Leesa Hooker

Fiona Burgemeister

Implementing and evaluating place-based initiatives for children

Dr Burgemeister explored how evidence-based programs can be effectively implemented in place-based initiatives for disadvantaged children. Her research found that implementation was facilitated by organisational readiness, skilled and enthusiastic staff, adequate resourcing, and attention to 'place'. Her findings are influencing how services are delivered to improve outcomes for Australian children.

Supervised by Jan Nicholson, Lisa Amir, Sharinne Crawford, Stacey Hokke and Naomi Hackworth (Parenting Research Centre)

Heather Grimes

The RUBY breastfeeding randomised trial: A mixed methods study of the implementation of an effective breastfeeding peer support intervention

Dr Grimes explored the implementation of a successful telephone peer support intervention that increased the proportion of new mothers breastfeeding to six months postpartum, an important public health goal. The study focused on the experiences of peer volunteers. Findings support peer support as a sustainable intervention that is acceptable to volunteers.

Supervised by Della Forster, Helen McLachlan and Touran Shafiei

Catina Adams

Fiona Burgemeister accepting her Nancy Millis medal

Heather Grimes

Master of Applied Science graduate 2022

Tanisha Springall

Exploring breastfeeding initiation and maintenance for First Nations women and infants in Victoria, Australia

Tanisha explored rates of breastfeeding for First Nations families accessing a culturally specific midwifery continuity of care model. She found high rates of breastfeeding initiation, and maintenance at three months, with recommendations for implementation and upscaling of these models as a strategy to improve breastfeeding outcomes.

Supervised by Helen McLachlan and Della Forster.

Tanisha Springall (centre) with supervisors Professor Helen McLachlan and Professor Della Forster

Postgraduate Students

Anita Moorhead

Diabetes and Antenatal Milk Expressing (DAME): A randomised controlled trial

Supervised by Della Forster, Lisa Amir and Sharinne Crawford

Anne O'Neill

Clinical supervision in the Victorian Maternal and Child Health Nurses: a mixed method study

Supervised by Kristina Edvardsson and Leesa Hooker

Bijaya Pokharel

Exploring culturally competent primary care family violence responses

Supervised by Angela Taft, Leesa Hooker and Jane Yelland

Bree Bulle

What are the critical factors to sustain multidisciplinary mortality and morbidity review with participants from rural and regional maternity services in Victoria?

Supervised by Michelle Newton and Sharinne Crawford

Brianna Pike

How does reproductive coercion impact safety, life choices and help-seeking behaviours?

Supervised by Kristina Edvardsson and Leesa Hooker

Brooke Henshall

Perceived barriers to physiological birth among midwives and obstetricians: An investigation into shared decision making, medical intervention in birth, and clinical practices

Supervised by Christine East and Jenny Davis

Carol Reid

Rural workforce perspectives on trauma-informed primary health care: Service approaches inclusive of Aboriginal and Torres Strait Islander parents

Supervised by Catherine Chamberlain, Lisa Amir and Shannon Bennetts

Charlie Benzie

ABLE: Asking women aBout disabiLitiEs

Supervised by Helen McLachlan, Della Forster and Michelle Newton

Deborah Pidd

Identifying a woman-centred evidenced-based pathway for women who have experienced a previous psychologically traumatic birth

Supervised by Christine East and Michelle Newton

Desireé LaGrappe

Maternal and Child Health Nursing: A golden opportunity to integrate screening for reproductive coercion and increase effective contraception use in Australia and beyond?

Supervised by Kristina Edvardsson, Leesa Hooker and Angela Taft

Elenora Greenwood

Autism coming to hospital: Optimising care for patients with Autism Spectrum Disorder

Supervised by Amanda Cooklin, Josie Barbaro (School of Psychology and Public Health) and Charne Miller (University of Melbourne)

Fiona Faulks

The impact of caseload midwifery (continuity of care) on the perinatal outcomes of vulnerable women in a regional centre

Supervised by Touran Shafiei, Kristina Edvardsson and Méabh Cullinane

Fiona McLardie-Hore

RUBY – Ringing up about breastfeeding early: A randomised controlled trial

Supervised by Della Forster, Helen McLachlan and Touran Shafiei

Helen Lees

How does the Victorian Maternal and Child Health Service demonstrate it is making a difference to the health outcomes of children

Supervised by Leesa Hooker and Kristina Edvardsson

Jessica Bee

Exploring volunteers' experience of and motivations for providing peer support in the DAISY (Depression and Anxiety peer Support studY) randomised controlled trial

Supervised by Della Forster, Helen McLachlan and Touran Shafiei

Kate McCredie

The long arm of the job: Exploring parents' jobs and children's development

Supervised by Amanda Cooklin, Stacey Hokke and Liana Leach (Australian National University)

Kerryn O'Rourke

Volunteer doula support for women experiencing socioeconomic disadvantage in Melbourne: A realist evaluation

Supervised by Touran Shafiei, Michelle Newton and Jane Yelland (Murdoch Children's Research Institute)

Kim Howland

An exploration of tele health in the Victorian Maternal and Child Health Services

Supervised by Jan Nicholson, Leesa Hooker and Kristina Edvardsson

Lael Ridgway

Victorian Maternal and Child Health Service provision: What, when and how?

Supervised by Jan Nicholson, Stacey Hokke, Lisa McKenna (School of Nursing and Midwifery) and Naomi Hackworth (Parenting Research Centre)

Mercy Henry

Family violence support systems for South East Asian Community

Kristina Edvardsson, Touran Shafiei and Joyce Jiang (Multicultural Centre for Women's Health)

Meriem Perona

Pre hospital management of atypical Acute Coronary Syndrome by Victorian Emergency Ambulance Paramedics

Supervised by Amanda Cooklin, Aziz Rahman (Federation University), Peter O'Meara (Monash University) and Omar Farouque (Austin Health)

Mini Varughese

Improving breastmilk feeding and breastfeeding in preterm infants in neonatal units

Supervised by Lisa Amir and Melissa Buultjens (School of Psychology and Public Health)

Molly Allen-Leap

What are the experiences of migrant and refugee women when seeking support for family violence from their GP?

Supervised by Angela Taft, Leesa Hooker, Kayli Wild and Ingrid Wilson

Noushin Arefadib

Examining the postnatal depression and anxiety screening and management practices of MCH nurses in Victoria: A mixed methods study

Supervised by Touran Shafiei, Amanda Cooklin and Jan Nicholson

Raquel Dumas

The experience of first-time parent groups in Australia: A qualitative study

Supervised by Christine East and Jenny Davis

Ranmali Rodrigo

Storage and transport of expressed breast milk for infants in two Neonatal Intensive Care Units: Exploratory studies in Australia and Sri Lanka

Supervised by Lisa Amir and Della Forster

Rebecca Hyde

Your views matter – Exploring families experience of care in the Newborn Intensive Care

Supervised by Della Forster, Helen McLachlan, Touran Shafiei and Sue Jacobs (Royal Women's Hospital)

Renee Kam

Breast hypoplasia and insufficient milk production: An exploration

Supervised by Lisa Amir and Méabh Cullinane

Res McCalman

What are the views and experiences of Aboriginal and Torres Strait Islander women having a baby in Victoria?

Supervised by Helen McLachlan, Della Forster and Michelle Newton

Robyn Matthews

EXPert study – Exploring midwives' perceptions of 'expertise' and experiences of work

Supervised by Della Forster, Michelle Newton, Touran Shafiei and Fleur Llewellyn (Royal Women's Hospital)

Sarah Hay

Evaluating a new Parenting Kit designed by the Royal Women's Hospital: A mixed methods study

Supervised by Helen McLachlan, Michelle Newton, Della Forster and Touran Shafiei

Sharon Mumford

FUCHSIA: Future proofing the midwifery workforce in Victoria: A statewide cross-sectional survey exploring health, wellbeing and sustainability

Supervised by Michelle Newton and Helen McLachlan

Stefanie Zugna

Evaluation of the impact of the Maternity and Newborn Emergencies (MANE) education program on safety culture in health organisations

Supervised by Helen McLachlan, Della Forster and Méabh Cullinane

Significant lectures and presentations

Perinatal Society of Australia and New Zealand (PSANZ), Adelaide, 15-18 May 2022

Della Forster *COVID-19 and Beyond – Changes to provision of maternity care and future plans among Victorian Maternity Services*

Rebecca Hyde: *Women's views and experiences of antenatal care during the COVID-19 pandemic: a cross-sectional survey of women birthing in Melbourne, Victoria in 2020*

Robyn Matthews: *Midwifery workforce challenges – Staffing and skill mix in Victorian hospitals in 2021*

Tanisha Springall: *Rates of breastfeeding for First Nations women in Victoria, Australia: A cross-sectional study*

Lactation Consultants of Australia and New Zealand (LCANZ) conference, Kingscliff, NSW, 20-21 May 2022

Lisa Amir *When breastfeeding is a pain: how to assess and manage pain in lactation;* and *Identifying design solutions to increase women's comfort with breastfeeding in public*

Anita Moorhead *'Is there any point in me doing this?' The views and experiences of women in the Diabetes and Antenatal Milk Expressing (DAME) trial*

Renee Kam *Breast hypoplasia and insufficient milk production: An exploration*

Australian Institute of Family Studies (AIFS) Conference, Melbourne, 15-17 June 2022

Stacey Hokke *What helps dads balance work and family? Interviews with Australian fathers*

Sharinne Crawford and **Stacey Hokke** *Everything's magnified, the good and the bad: Parenting in the social media age*

Kerryn O'Rourke *Realist evaluation of a volunteer doula program for women experiencing socio-economic adversity in Melbourne*

Catina Adams *Threads of practice: The roles of Enhanced Maternal and Child Health home-visiting nurses working with women experiencing domestic violence*

Nursing Network on Violence Against Women International (NNVAWI) conference, 21-23 June 2022

Leesa Hooker *"Child-Parent Psychotherapy for mothers and children who have experienced intimate partner violence trauma: a qualitative study of women's experiences*

Leesa Hooker *The prevalence of unplanned pregnancy and associated factors among a population-based cohort of young Australian women*

Jessica Ison *Is the primary prevention of sexual violence and harassment a priority at Australian universities? A qualitative study*

Catina Adams *Threads of practice: The roles of Enhanced Maternal and Child Health home visiting nurses working with women experiencing family violence* [virtual]

Kayli Wild *Empathy as a cornerstone of responding to violence against women: Measuring the impact of the WHO curriculum on health provider empathy in Timor-Leste* [virtual]

Bijaya Pokharel *Qualitative process evaluation of a general practice-based culturally competent family violence intervention in Australia.* [virtual]

Bijaya Pokharel *Family violence primary care response to women from culturally and ethnically diverse backgrounds: a systematic review* [virtual]

Angela Taft *Building cultural competency into primary care management of domestic violence among migrant/refugee communities: Harmony, a cluster randomised trial* [virtual]

La Trobe University Research month October 2022

Lisa Amir *Using data from MoBa* (Norwegian Mother, Father and Child Cohort Study) to explore maternal medication use during lactation. Big Data Analysis Community of Practice. 13 October 2022

Della Forster, Robyn Matthews, and **Rebecca Hyde** were panel members: ARCH Seminar Series Safe Maternity Care. *Our in-depth work studying the midwifery workforce spanning the past five years has important learnings about the profession, the pre-pandemic situation and how the sector is affected by the pandemic.* 27 October 2022

Sharinne Crawford was part of a panel sponsored by Cultures of Health Research cluster, the Healthy People, Families and Communities Theme and the Social Change and Equity Theme. *Running a successful interdisciplinary health research collaboration*. 31 October 2022

Other

Stacey Hokke *Exploring workplace barriers and supports of fathers' work-family balance: Interviews with Australian dads*. Australian Fatherhood Research Symposium, Melbourne, 5-6 May 2022

Sharinne Crawford and **Stacey Hokke** *Everything's magnified, the good and the bad: Parenting in the social media age* [virtual]. 12th International Conference on Social Media + Society, online, 18-20 July 2022

Lisa Amir *Urban design solutions to support breastfeeding in public.* World Breastfeeding Week free webinar, GOLD Learning, 2 August 2022

Felicity Young *Integrating violence against women in national midwifery curriculum in Timor-Leste* (plenary presentation). Presented on behalf of Kayli Wild, Guilhermina de Araujo, Lidia Gomes, Angelina Fernandes, Leesa Hooker, Angela Taft. Sexual violence research initiative (SVRI) Conference in Cancun, Mexico, 19-22 September 2022

Felicity Young, Bijaya Pokharel and **Asha Padisetti** *Culturally competent and online: domestic violence and abuse training for primary healthcare practitioners* Presented on behalf of Angela Taft, Jennifer Neil, Kelsey Hegarty, Gene Feder, 22 September 2022

Helen McLachlan, Pamela (Res) McCalman and Della Forster *Supporting the midwifery workforce to work in Birthing on Country services.* National Birthing on Country Conference in Alice Springs, 10 October 2022

Lisa Amir *Shining a light on mastitis research* Congresso LactApp Medical, Spain, 27 July 2022 [virtual with simultaneous translation]

Lunchtime Seminars

2022

2 FEBRUARY

Professor Sara Bayes, Australian Catholic University

Implementing evidence into practice: challenges and strategies in midwifery and maternity care

17 FEBRUARY

Dr Leesa Hooker and Dr Jess Ison, La Trobe University

Tramlab: Improving the safety of women and girls on public transport in Melbourne

2 MARCH

Hannah Slootjes, La Trobe University

The emerging role of occupational therapy in perinatal health, and introducing the Person-centred Occupational Model of Matrescence

6 APRIL

Sophia Holmlund, La Trobe University and Umeå Universitet, Sweden

Maternity care in the Hanoi region, Vietnam - experiences from the CROss Country UltraSound study (CROCUS study)

4 MAY

Professor Pamela Snow, La Trobe University

Oral language competence, the transition to reading, and a healthy start to life

10 MAY

Special seminar – Judith Lumley Centre, La Trobe Violence Against Women Research Network and La Trobe Institute for Human Security and Social Change

Professor Bruce Rasmussen and Dr John Symons, Victoria University

Eliminating child marriage: the costs and benefits of an intervention program to achieve the Sustainable Development Goals for child marriage

1 JUNE

Steven Kennedy, Prepare Foundation

Are fathers the sleeping giants of maternity care?

1 JULY

Professor Helen McLachlan, La Trobe University

Translating evidence into practice: Implementing culturally safe continuity of midwifery care for First Nations women in three maternity services in Victoria, Australia

3 AUGUST

Dr Deirdre Gartland, Murdoch Children's Research Institute

Mothers and children's mental and physical health in the context of family violence in a large longitudinal population cohort

7 SEPTEMBER

Dr Adrian Walker, Department of Developmental Disability Neuropsychiatry, University of New South Wales

The health and service use of people with intellectual disability in New South Wales, Australia

5 OCTOBER

Professor Vicki Anderson, Murdoch Children's Research Institute

Supporting parents to optimise children's outcomes from brain injury

4 NOVEMBER

Professor Catherine Mills, Director Monash Bioethics Centre.

Maeve's Law, motherhood and mito: Mitochondrial donation in Australia

2 DECEMBER

Dr Briony Hill, Monash University

Socioecological perspectives to wellbeing across preconception, pregnancy and postpartum

Awards

Vice-Chancellor's Research Excellence Awards

Excellence in Industry Engagement:

Awarded to Professor Helen McLachlan in recognition of her ability to partner effectively to conduct impactful research with direct societal benefits.

School of Nursing & Midwifery Awards for Research Excellence:

Mid-Career Research Excellence:

Awarded to Associate Professor Leesa Hooker (LRHS):

Awarded to Associate Professor Kristina Edvardsson

Excellence in Industry Engagement:

Awarded to Professor Helen McLachlan and team for the project "Culturally safe continuity of midwifery care for First Nations women – translating evidence into practice"

Engagement Australia 2022 Excellence Awards

The 'Baggarrook Yarrongi (Women's Journey) was awarded prize for Excellence in Indigenous Engagement. The project was conducted by Professor Helen McLauchlan, Assoc Professor Michelle Newton, Professor Della Forster, Assoc Professor Touran Shafiei, Fiona McLardie Hore, Pamela (Res) McCalman, Tanisha Springall and team in partnership with the Victorian Aboriginal Community Controlled Health Organisation (VACCHO), and three Melbourne hospitals (Royal Women's Hospital, Joan Kirner, Hospital, and Mercy Hospital for Women).

The Engagement Australia Award for Excellence in Indigenous Engagement recognises "outstanding collaborations between tertiary education and Indigenous communities in Australia, New Zealand and beyond, that directly reduce disadvantage, and empower and give voice to First Nations peoples."

JLC Travel Award

Esther Calje was the winner of the inaugural JLC travel award ($1000 towards attendance at Perinatal Society of Australia and New Zealand 2023). Esther is a midwife researcher from New Zealand, working on her PhD titled "An observational study of the incidence and treatment of postpartum anaemia in Aotearoa, New Zealand".

La Trobe Honorary Degree

Adjunct Professor Tanya Farrell was awarded a Doctor of Public Health (*honoris causa*) in a ceremony at La Trobe University on the 27th of September. Tanya is a recognised leader and expert in nursing, midwifery and maternity services who has made an indelible contribution to the professions of nursing and midwifery, and more broadly across the health industry through her operational, strategic, and innovative approaches to the provision of health services. Tanya sits on the Chair Consultative Council on Obstetric and Paediatric Mortality and Morbidity and is Senior Maternity Advisor at Safer Care Victoria.

Maggie Flood Bursary winner

The Maggie Flood Bursary was established in 2021 by JLC alumna Dr Maggie Flood for HDR students at JLC to assist with costs associated with their research. The Maggie Flood Bursary is awarded each year for five years.

Deborah Pidd was awarded the Maggie Flood Bursary. The Bursary will enable Deb to attend three training workshops in trauma-informed practice with the Blue Knot Foundation. Deb's thesis is titled: "Enhancing shared-decision making between women who have experienced a psychologically traumatic birth and their maternity care providers: developing an evidence-based woman-centred support pathway".

Australian Awards for University Teaching

Dr Laura Whitburn and team received the award for Citation for Outstanding Contributions to Student Learning at the Australian Awards for University Teaching. This award recognised a significant body of work to transform the way anatomy is taught at La Trobe University. The focus was on how the team developed sustainable, peer-reviewed blended learning content to engage anatomy students, and the positive effect this transformation had on students' experiences and learning outcomes. The team included seven staff from the anatomy discipline across the Bundoora and Bendigo campuses, led by Dr Whitburn. This award is a meaningful recognition of the team's passion and dedication to positively impact students' learning.

Publications

Breastfeeding

Program lead: Professor Lisa Amir

Cullinane M, Schofield L, Murray GL, Payne MS, Bennett CM, Garland SM, Amir LH. Random amplified polymorphic DNA analysis reveals no clear link between Staphylococcus epidermidis and acute mastitis. *Aust N Z J Obstet Gynaecol* 2022; 62(4):605-09

Grzeskowiak LE, Saha MR, Ingman WV, Nordeng H, Eivind Y, Amir LH. Incidence, antibiotic treatment and outcomes of lactational mastitis: Findings from The Norwegian Mother, Father and Child Cohort Study (MoBa). *Paediatr Perinat Epidemiol* 2022; 36(2):254-63

Grzeskowiak LE, Saha MR, Nordeng H, Eivind Y, Amir LH. Perinatal antidepressant use and breastfeeding outcomes: Findings from The Norwegian Mother, Father and Child Cohort Study (MoBa). *Acta Obstet Gynecol Scand* 2022; 101(3):344-54

Hyde MK, Thorpe R, Masser BM, Kruse SP, Amir LH, Brown R, Clifford V, Klein LD. Understanding mothers' experiences of being ineligible to donate their milk to a not-for-profit milk bank. *Breastfeed Med* 2022; In press

McBride GM, Stevenson R, Zizzo G, Rumbold AR, Amir LH, Keir AK, Grzeskowiak LE. Knowledge of galactagogue use during breastfeeding in Australia: A cross sectional online survey. *J Hum Lact* 2022; 38(4):740-48

McLardie-Hore FE, Forster DA, Shafiei T, McLachlan HL. First-time mothers' experiences of receiving proactive telephone-based peer support for breastfeeding in Australia: a qualitative study. *Int Breastfeed J* 2022; 17:31

Moorhead AM, Amir LH, Forster DA, Crawford SB. 'Is there any point in me doing this?' Views and experiences of women in the Diabetes and Antenatal Milk Expressing (DAME) trial. *Matern Child Nutr* 2022; 18(2):e13307

Ravaldi C, Mosconi L, Wilson AN, Amir LH, Bonaiuti R, Ricca V, Vannacci A. Exclusive breastfeeding and women's psychological well-being during the first wave of COVID-19 pandemic in Italy. *Front Public Health* 2022; 10:965306

Skouteris H, Green R, Chung A, Bergmeier H, Amir LH, Baidwan SK, Chater AM, Chamberlain C, Emond R, Gibbons K, Gooey M, Hatzikiriakidis K, Haycraft E, Hills AP, Higgins DJ, Hooper O, Hunter SA, Kappelides P, Kleve S, Krakouer J, Lumeng JC, Manios Y, Mansoor A, Marmot M, Masse LC, Matvienko-Sikar K, McHiza ZJ, Meyer C, Moschonis G, Munro ER, O'Connor TM, O'Neil A, Quarmby T, Sandford R, Schneiderman JU, Sherriff S, Simkiss D, Spence A, Sturgiss E, Vicary D, Wickes R, Wolfenden L, Story M, Black MM. Nurturing children's development through healthy eating and active living: Time for policies to support effective interventions in the context of responsive emotional support and early learning. *Health Soc Care Community* 2022; 30(6):e6719-e6729

Springall TL, McLachlan HL, Forster DA, Browne J, Chamberlain C. Factors associated with breastfeeding initiation and maintenance for Aboriginal and Torres Strait Islander women in Australia: A systematic review and narrative analysis. *Women Birth* 2022; Online ahead of print

Springall T, Forster DA, McLachlan HL, McCalman P, Shafiei T. Rates of breast feeding and associated factors for First Nations infants in a hospital with a culturally specific caseload midwifery model in Victoria, Australia: a cohort study. *BMJ Open* 2022; In press

Springall TL, McLachlan HL, Forster DA, Browne J, Chamberlain C. Breastfeeding rates of Aboriginal and Torres Strait Islander women in Australia: a systematic review and narrative analysis. *Women Birth* 2022; 35(6):e624-e638

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Kam RL, Amir LH, Cullinane M. Response to Spatz re: "Is there an association between breast hypoplasia and breastfeeding outcomes? A systematic review" [Letter]. *Breastfeed Med* 2022; 17(8):703

Child, family and community health

Program lead: Associate Professor Leesa Hooker

Adams C, Hooker L, Taft A. A systematic review and qualitative meta-synthesis of the roles of home-visiting nurses working with women experiencing family violence. *J Adv Nurs* 2022; Online ahead of print

Adams C, Hooker L, Taft A. The characteristics of Australian Maternal and Child Health home visiting nurses undertaking family violence work: An interpretive description study. *J Adv Nurs* 2022; Online ahead of print

Burnett C, Rawat E, Hooker L, Schminkey D, Bacchus L, Hinton I. IPV nurse education: Scoping things out to see who's doing what? *Nurse Educ Today* 2022; 115:105407

O'Neill A, Edvardsson K, Hooker L. Clinical supervision practice by community-based child and family health nurses: A mixed-method systematic review. *J Adv Nurs* 2022; 78(6):1588-600

Opie J, Hooker L, Gibson T, & McIntosh J. My Early Relational Trust-Informed Learning (MERTIL) for parents: A study protocol for a brief, universal, online, preventative parenting program to enhance relational health. *PLOS ONE* 2022; Online ahead of print

Ridgway L, McKenna L, Hokke S, Hackworth N, Nicholson JM. Maternal and Child Health Nursing education before and during COVID-19: An exploratory descriptive study. *J Prof Nurs* 2022; 41(July-August):100-07

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Hooker L. Inferences made about the impact of COVID-19 public health restrictions on women and young infants in Victoria [Letter]. *J Paediatr Child Health* 2022; 58(6):1120

Mother and infant health and maternity services

Program leads: Professor Della Forster, Professor Helen McLachlan, Professor Christine East

Abdulghani N, Cooklin A, Edvardsson K, Amir LH. Mothers' perceptions and experiences of skin-to-skin contact after vaginal birth in Saudi Arabia: A cross-sectional study. *Women Birth* 2022; 35:e60-e67

Ahrne M, Byrskog U, Essen B, Andersson E, Small R, Schytt E. Group antenatal care (gANC) for Somali-speaking women in Sweden - a process evaluation. *BMC Pregnancy Childbirth* 2022; 22:721

Akselsson A, Cabander L, Thorarinsdottir S, Small R, Ternstrom E. Language-supported labor ward visits for pregnant migrant women: Staff experiences in a Swedish hospital. *Eur J Midwifery* 2022; 6:42

Akselsson A, Westholm L, Small R, Ternstrom E. Midwives' communication with non-Swedish-speaking women giving birth: A survey from a multicultural setting in Sweden. *Eur J Midwifery* 2022; 6:38

Benzie C, Newton M, Forster D, McLachlan H. How are women with a disability identified in maternity services in Australia? A cross-sectional survey of maternity managers. *Women Birth* 2022; 36(1):e161-e168

Cullinane M, Zugna SA, McLachlan HL, Newton MS, Forster DA. Evaluating the impact of a maternity and neonatal emergencies education programme in Australian regional and rural health services on clinician knowledge and confidence: a pre-test post-test study. *BMJ Open* 2022; 12(5):e059921

de Jersey S, Guthrie T, Callaway L, Tyler J, New K, Nicholson J. A theory driven, pragmatic trial implementing changes to routine antenatal care that supports recommended pregnancy weight gain. *BMC Pregnancy Childbirth* 2022; 22:416

Flenady V, Gardener G, Ellwood D, Coory M, Weller M, Warrilow KA, Middleton PF, Wojcieszek AM, Groom KM, Boyle FM, East C, Lawford H, Callander E, Said JM, Walker SP, Mahomed K, Andrews C, Gordon A, Norman JE, Crowther C. My Baby's Movements: a stepped-wedge cluster-randomised controlled trial of a fetal movement awareness intervention to reduce stillbirths. *BJOG* 2022; 129(1):29-41

Hay SJ, McLachlan HL, Newton M, Forster DA, Shafiei T. Sources of information during pregnancy and the early parenting period: Exploring the views of women and their partners. *Midwifery* 2022; 105:103236

Holmlund S, Lan PT, Edvardsson K, Ntaganira J, Graner S, Small R, Mogren I. Vietnamese midwives' experiences of working in maternity care - A qualitative study in the Hanoi region. *Sex Reprod Healthc* 2022; 31:100695

Lindgren H, Eltayb A, Wahlberg A, Tsekhmestruk N, Small R, Schytt E. Multi-tasking community-based bilingual doulas are bridging gaps–Despite standing on fragile ground. A qualitative study of doulas' experiences in Sweden. *Midwifery* 2022; 105:103231

McCalman P, McLardie-Hore F, Newton M, McLachlan H, Forster D. Trust, privacy, community, and culture: Important elements of maternity care for Aboriginal and Torres Strait Islander women giving birth in Victoria. *Women Birth* 2022; 36(1):e150-e160

McLachlan HL, Newton M, McLardie-Hore FE, McCalman P, Jackomos M, Bundle G, Kildea S, Chamberlain C, Browne J, Ryan J, Freemantle J, Shafiei T, Jacobs SE, Oats J, Blow N, Ferguson K, Gold L, Watkins J, Dell M, Read K, Hyde R, Matthews R, Forster DA. Translating evidence into practice: Implementing culturally safe continuity of midwifery care for First Nations women in three maternity services in Victoria, Australia. *EClinicalMedicine* 2022; 47:101415

McCarthy MF, Pollock WE, McDonald SJ. Implementation of an obstetric triage decision aid into a maternity assessment unit and emergency department. *Women Birth* 2022; 35(3):e275-e285

McLardie-Hore FE, McLachlan HL, Newton MS, Bundle G, Druce T, Jackomos M, Forster DA. Accurate identification and documentation of First Nations women and babies attending maternity services: How can we 'close the gap' if we can't get this right? *Aust N Z J Obstet Gynaecol* 2022; Online ahead of print

Matthews RP, Hyde RL, Llewelyn F, Shafiei T, Newton MS, Forster DA. Factors associated with midwives' job satisfaction and experience of work: a cross-sectional survey of midwives in a tertiary maternity hospital in Melbourne, Australia. *Women Birth* 2022; 35(2):e153-e162

Matthews RP, Hyde RL, Llewelyn F, Shafiei T, Newton MS, Forster DA. Who is at risk of burnout? A cross-sectional survey of midwives in a tertiary maternity hospital in Melbourne, Australia. *Women Birth* 2022; 35(6):e615-e623

Muggli E, Halliday J, Elliott EJ, Penington A, Thompson D, Spittle AJ, Forster D, Lewis S, Hearps S, Anderson PJ. Cohort profile: early school years follow-up of the Asking Questions about Alcohol in Pregnancy Longitudinal Study in Melbourne, Australia (AQUA at 6). *BMJ Open* 2022; 12(1):e054706

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Mumford S, Newton M, Benzie C, Forster D, Matthews R, Hyde R, Llewelyn F, McLachlan H. Supporting the midwifery workforce: An evaluation of an undergraduate midwifery student employment model at a large tertiary maternity service in Victoria, Australia. *Women Birth* 2022; 36(1):e65-e77

Newton M, Faulks F, Bailey C, Davis J, Vermeulen M, Tremayne A, Kruger G. Continuity of care experiences: A national cross-sectional survey exploring the views and experiences of Australian students and academics. *Women Birth* 2022; 35(3):e253-262

O'Rourke K, Abdulghani N, Yelland J, Newton M, Shafiei T. Cross-cultural realist interviews: An integration of the realist interview and cross-cultural qualitative research methods. *Evaluation Journal of Australasia* 2022; 22(1):5-17

O'Rourke K, Yelland J, Newton M, Shafiei T. How and when doula support increases confidence in women experiencing socioeconomic adversity: Findings from a realist evaluation of an Australian volunteer doula program. *PLOS ONE* 2022; 17(6):e0270755

O'Rourke K, Yelland J, Newton M, Shafiei T. Matching of woman and doula, and the generation of trust in an Australian volunteer doula program: Findings from a realist evaluation. *Health Soc Care Community* 2022; 30(6):e5423-e5433

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Cullinane M, Forster D, McLachlan H, Benzie C, Newton M. Evaluation of the Operational Maternity Service Model of Care for Castlemaine Health. Melbourne: La Trobe University, Judith Lumley Centre; 2022

McLachlan H, Newton M, Benzie C, East C, Pliska M. Evaluating a pilot 'Registered Undergraduate Student of Midwifery' (RUSOM) model: Mercy Health. Melbourne: La Trobe University, Judith Lumley Centre; 2022

Matthews R, Hyde R, McLachlan H, Newton M, Mumford S, Shafiei T, Llewelyn F, Cullinane M, Cooklin A. FUCHSIA Future proofing the midwifery workforce in Victoria: A state-wide cross-sectional study exploring health, well-being and sustainability. La Trobe University, Judith Lumley Centre; 2022

Perinatal mental health

Program lead: Professor Touran Shafiei

Arefadib N, Cooklin A, Nicholson JM, Shafiei T. Disparities in postnatal depression and anxiety screening: Results from a cross sectional survey of Maternal and Child health nurses in Victoria, Australia. *Sex Reprod Healthc* 2022; 33:100737

Arefadib N, Cooklin A, Shafiei T. Barriers and enablers to postpartum depression and anxiety screening: A qualitative study of Victorian maternal and child health nurses' practices. *Health Soc Care Community* 2022; 30(6):e5434-e5444

Arefadib N, Shafiei T, Cooklin A. Barriers and facilitators to supporting women with postnatal depression and anxiety: A qualitative study of maternal and child health nurses' experiences. *J Clin Nurs* 2022; 32(3-4):397-08

Preventing and reducing violence against women and children

Program leads: Professor Angela Taft, Associate Professor Leesa Hooker

Allen-Leap M, Hooker L, Wild K, Wilson IM, Pokharel B, Taft A. Seeking help from primary health-care providers in high-income countries: A scoping review of the experiences of migrant and refugee survivors of domestic violence. *Trauma Violence Abuse* 2022; Online ahead of print

Clinnick I, Ison J, Hooker L. 'Drink spiking' in Australian news media: A feminist discourse analysis. *Feminist Media Studies* 2022; In press

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Flaathen EME, Henriksen L, Smastuen MC, Schei B, Taft A, Noll J, Garnweidner-Holme L, Lukasse M. Safe Pregnancy intervention for intimate partner violence: a randomised controlled trial in Norway among culturally diverse pregnant women. *BMC Pregnancy Childbirth* 2022; 22:144

Fogarty A, Savopoulos P, Seymour M, Cox A, Williams K, Petrie S, Herman S, Toone E, Schroeder K, Giallo R. Providing therapeutic services to women and children who have experienced intimate partner violence during the COVID-19 pandemic: Challenges and learnings. *Child Abuse Negl* 2022; 130(Pt 1):105365

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Forsdike K, O'Sullivan G, Hooker L. Major sports events and domestic violence: A systematic review. *Health Soc Care Community* 2022; 30(6):e3670-e3685

Giallo R, Fogarty A, Savopoulos P, Cox A, Toone E, Williams K, Jones A, Treyvaud K. Capturing the experiences of clinicians implementing a new brief intervention for parents and children who have experienced family violence in Australia. *Health Soc Care Community* 2022; 30(5):e1599-e1610

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Hailemariam M, Zlotnick C, Taft A, Johnson JE. MOSAIC (MOthers' AdvocateS In the Community) for pregnant women and mothers of children under 5 with experience of intimate partner violence: A pilot randomized trial study protocol. *PLOS ONE* 2022; 17(5):e0267679

Hooker L, Toone E, Raykar V, Humphreys C, Morris A, Westrupp E, Taft A. Reconnecting mothers and children after violence (RECOVER): a feasibility study protocol of child-parent psychotherapy in Australia. *BMJ Open* 2019; 9(5):e023653

Ison J, Hooker L, Allen-Leap M, Newton M, Taft A. "One of the most important subjects for a healthcare worker": Cross-sectional student evaluation of family violence best practice response curriculum. *Nurs Health Sci* 2022; 24(1):195-203

Signorelli M, Taft A, Gartland D, Hooker L, McKee C, MacMillan H, Brown S, Hegarty K. How valid is the question of fear of a partner in identifying intimate partner abuse? A cross-sectional analysis of four studies. *J Interpers Violence* 2022; 37(5-6):2535–56

Thomas B, O'Meara P, Edvardsson K, McCann D, Spelten E. Perpetrator and situational characteristics associated with security alerts in regional Australian emergency departments. *BMC Emerg Med* 2022; 22:48

Wild K, Young F, de Araujo G, Fernandes A, Gomes L, Kelly L, Taft A. Healthcare responses to gender-based violence in Timor-Leste: Women want empathy, information and safety from an integrated support system. *J Interpers Violence* 2022; 37(23-24):NP22175-98

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La Trobe University proudly acknowledges the Traditional Custodians of the lands where its campuses are located in Victoria and New South Wales. We recognise that Indigenous Australians have an ongoing connection to the land and value their unique contribution, both to the University and the wider Australian society.

La Trobe University is committed to providing opportunities for Aboriginal and Torres Strait Islander people, both as individuals and communities, through teaching and learning, research and community partnerships across all of our campuses.

The wedge-tailed eagle (Aquila audax) is one of the world's largest. The Wurundjeri people – traditional owners of the land where the Judith Lumley Centre is located and where most of our work is conducted – know the wedge-tailed eagle as Bunjil, the creator spirit of the Kulin Nations.

There is a special synergy between Bunjil and the La Trobe logo of an eagle. The symbolism and significance for both La Trobe and for Aboriginal people challenges us all to 'gamagoen yarrbat' – to soar.

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